

OAKLAND CHILDREN'S HOSPITAL
AND RESEARCH CENTER

HISTORIC RESOURCE EVALUATION
PART I

OAKLAND, CALIFORNIA
[13019]

Prepared for
LSA ASSOCIATES, INC.



PAGE & TURNBULL

imagining change in historic environments through design, research, and technology

AUGUST 5, 2013

FINAL

TABLE OF CONTENTS

TABLE OF CONTENTS	I
I. INTRODUCTION	4
A. METHODOLOGY.....	6
B. EVALUATION CRITERIA.....	6
C. STATUS OF A BUILDING AS A HISTORICAL RESOURCE FOR CEQA.....	9
II. SUMMARY OF DETERMINATION	11
III. CURRENT HISTORIC STATUS	14
A. NATIONAL REGISTER OF HISTORIC PLACES.....	14
B. CALIFORNIA REGISTER OF HISTORICAL RESOURCES.....	14
C. CALIFORNIA HISTORICAL RESOURCE STATUS CODE	15
D. OAKLAND CULTURAL HERITAGE SURVEY	15
E. CITY OF OAKLAND’S PROTECTED TREE ORDINANCE.....	18
IV. HISTORIC CONTEXT	19
A. HISTORY OF OAKLAND	19
B. TEMESCAL NEIGHBORHOOD HISTORY	22
C. CHILDREN’S HOSPITAL.....	26
V. CHILDREN’S HOSPITAL ARCHITECTURAL DESCRIPTIONS	48
A. SITE DESCRIPTION.....	48
B. A/B WING (BABY HOSPITAL) (1926, ADDITIONS CA. 1948 AND 1962).....	49
C. B/C WING (1946, ADDITIONS 1958 AND 1987).....	54
D. BRUCE LYON MEMORIAL RESEARCH CENTER (1958, ADDITION 1972).....	58
E. FORD DIAGNOSTIC AND TREATMENT CENTER (1962, ADDITION 1974).....	60
F. CENTRAL PLANT/WEST SITE PLANT (1979, ADDITION 1987).....	61
G. PATIENT TOWER (1982).....	62
H. CAFETERIA (1987)	62
I. THE BRUCE LYON MEMORIAL RESEARCH CENTER ADDITION (1992)	63
J. OUTPATIENT CENTER (1993).....	64
K. PARKING GARAGE (1993)	64
L. CARDIAC CATHETERIZATION LAB (1993)	64
M. HELISTOP (2000)	65
N. PORTABLE BUILDINGS (VARIOUS DATES)	65
VI. EVALUATION OF CHILDREN’S HOSPITAL BUILDINGS FOR CALIFORNIA REGISTER ELIGIBILITY	67
A. A/B WING (BABY HOSPITAL) EVALUATION.....	67
B. B/C WING EVALUATION	73

C. EVALUATION OF A/B WING AND B/C WING TOGETHER	78
D. THE BRUCE LYON MEMORIAL RESEARCH CENTER EVALUATION	80
E. THE FORD RESEARCH AND DIAGNOSTIC CENTER EVALUATION	84
F. EVALUATION OF MAGNOLIA TREE	87
G. EVALUATION OF OTHER BUILDINGS ON THE MAIN HOSPITAL SITE	87
H. EVALUATION OF THE HOSPITAL COMPLEX AS A HISTORIC DISTRICT	87
VII. EVALUATION OF CHILDREN’S HOSPITAL FOR ELIGIBILITY AS A CITY OF OAKLAND DESIGNATED HISTORIC PROPERTY	90
A. A/B WING (BABY HOSPITAL).....	90
B. THE B/C WING	94
C. THE A/B WING AND B/C WING TOGETHER	97
D. THE BRUCE LYON MEMORIAL RESEARCH CENTER.....	100
E. THE FORD DIAGNOSTIC AND RESEARCH CENTER.....	103
VIII. EVALUATION OF THE CHILDREN’S HOSPITAL COMPLEX AS A CITY OF OAKLAND LOCAL HISTORIC DISTRICT	106
IX. STATUS OF CHILDREN’S HOSPITAL BUILDINGS AS HISTORICAL RESOURCES UNDER CEQA	107
X. A/B WING (BABY HOSPITAL) CHARACTER-DEFINING FEATURES DIAGRAMS	109
CHARACTER DEFINING FEATURES OF THE A/B WING (BABY HOSPITAL).....	109
XI. RESIDENTIAL/COMMERCIAL PROPERTIES EVALUATION	110
A. 55 TH AND DOVER RESIDENTIAL DISTRICT	110
B. 682 52 ND STREET	111
C. 688 52 ND STREET	114
D. 720 52 ND STREET.....	117
E. 5203 DOVER STREET	120
F. 5212-5214 DOVER STREET	123
G. 5225 DOVER STREET.....	126
H. 665 53RD STREET	129
I. 671 53RD STREET	131
J. 675 53 RD STREET	134
K. 677-679 53 RD STREET	137
L. 685-689 53 RD STREET	140
M. 707 53 RD STREET	143
N. 715 53 RD STREET	146
O. 5204 MARTIN LUTHER KING JR. WAY	149
XII. CONCLUSION	152
XIII. REFERENCES CITED	154

A. PUBLISHED	154
B. PUBLIC RECORDS.....	154
C. NEWSPAPERS AND PERIODICALS.....	155
D. UNPUBLISHED MANUSCRIPTS	155
E. INTERNET SOURCES.....	156
F. OTHER.....	156
XIV. APPENDICES.....	158
A. OAKLAND GENERAL PLAN – HISTORIC PRESERVATION ELEMENT – APPENDIX D (SEPTEMBER 1993)	158
B. CITY OF OAKLAND EVALUATION SHEETS FOR LANDMARK ELIGIBILITY	158

I. INTRODUCTION

This Historic Resource Evaluation (HRE) has been prepared at the request of LSA Associates, Inc. (LSA) for the Children’s Hospital and Research Center Oakland (Children’s Hospital) located at 747 52nd Street. The report also evaluates fourteen residential properties located in proximity to the hospital: 682, 688, and 720 52nd Street; 665, 671, 675, 677-679, 685-689, 707, and 715 53rd Street; 5203, 5212-5214, and 5225 Dover Street; and 5204 Martin Luther King Jr. Way (**Figure 1**). The report does not study the Children’s Hospital Oakland Research Institute (CHORI) campus at 5700 Martin Luther King Jr. Way.



Figure 1. Aerial photograph of study site with hospital highlighted in red and nearby residences, mixed-use, and office buildings are highlighted in green.

Source: Google Maps, altered by Page & Turnbull

The Children’s Hospital and Research Center Oakland is a complex of medical-use buildings located on a roughly triangular site in the Temescal neighborhood of Oakland. The site is bounded by 53rd Street to the north, the Grove Shafter Freeway (State Route 24) to the east and south, and Martin Luther King Jr. Way to the west. The complex spans several Alameda County Assessor’s parcels (14-1206-26-1, 14-1205-19-1, and 14-1204-14-5) and is comprised of three two- to five-story agglomerative buildings as well as several portable buildings and ancillary structures. The oldest building in the hospital complex, historically known as the Baby Hospital and now commonly referred to as the A/B Wing, was designed by Edward W. Cannon and constructed in 1926.¹ The first addition to the A/B Wing (Baby Hospital) was constructed in 1946, and since then the hospital

¹ For consistency, this HRE refers to this building by both names throughout the document.

has continued to expand through demolition, reconstruction, additions and new construction. The multi-structure complex covers nearly the entire site, and serves as the main treatment facility for Children’s Hospital.

The additional fourteen properties outside the Hospital complex that are included in this evaluation are also located in the City of Oakland’s Temescal neighborhood, proximate to the north and east of the Children’s Hospital complex. The properties are located along 52nd Street, 53rd Street, Dover Street, and Martin Luther King Jr. Way, and include the following Alameda County Assessor’s parcels:

- 682 52nd Street: APN 14-1215-19
- 688 52nd Street: APN 14-1215-20
- 720 52nd Street: APN 14-1206-04
- 665 53rd Street: APN 14-1215-28-03
- 671 53rd Street: APN 14-1215-27-02
- 675 53rd Street: APN 14-1215-26
- 677-679 53rd Street: APN 14-1215-25
- 685-689 53rd Street: APN 14-1215-24
- 707 53rd Street: APN 14-1206-28
- 715 53rd Street: APN 14-1206-27
- 5203 Dover Street: APN 14-1206-03
- 5212-5214 Dover Street: APN 14-1215-21-01
- 5225 Dover Street: APN 14-1206-26-01
- 5204 Martin Luther King Jr. Way: APN 14-1206-25

These properties include twelve one- to two-story residential buildings built from 1905 to 1922 for independent owners by various architects and builders, one mixed use residential and commercial building (685-689 53rd Street), and one one-story office building built by the Children’s Hospital for their marketing department after 1985 (665 53rd Street). Some of the residential buildings included in the evaluation continue their historic function as residences, and some are currently used as hospital-related offices. Thirteen of the fourteen adjacent properties are located within the 55th and Dover Residential District, a City of Oakland Local Historic District (Area of Secondary Importance).

This HRE provides a historic context statement and architectural descriptions for all Children’s Hospital buildings and the fourteen additional proximate properties. It includes information about the existing historical status of each building and provides, for each building found to be 45 years old or older, evaluation for historic significance and inclusion in the California Register of Historical Resources (California Register) and as a City of Oakland Designated Historic Property. It also evaluates the Children’s Hospital complex, including a mature magnolia tree located at the site, as a potentially significant historic district for the California Register and as a City of Oakland Local Historic District. The residential and commercial properties in the adjacent Temescal neighborhood are evaluated for their eligibility for individual listing in the California Register and as Oakland Designated Historic Properties.

A. METHODOLOGY

This HRE was completed to inform the potential redevelopment of the Children’s Hospital complex and the area in the vicinity of Dover and 52nd streets. To prepare this HRE, Page & Turnbull conducted an intensive-level architectural survey, extensive historical research, and an evaluation of the historic significance of each building found to be 45 years old or older. In greater detail, the following methods were used:

- Page & Turnbull surveyed and photographed the exterior of all Children’s Hospital buildings and the fourteen adjacent properties in May 2013. Interior access was gained only for the Children’s Hospital main building complex at 747 52nd Street. For the additional properties, interior features were not examined or evaluated.
- Research was conducted at select local repositories, including the Oakland Cultural Heritage Survey, Oakland History Room at the Oakland Public Library, the San Francisco Public Library, and the Bancroft Library at the University of California, Berkeley. Additional information was gathered from Children’s Hospital records, census records, voter registrations, and Page & Turnbull’s in-house archive. Census records and Sanborn Fire Insurance Maps were used to their most recent availability. Page & Turnbull also consulted with Betty Marvin, Planner with the City of Oakland’s Cultural Heritage Survey.
- Page & Turnbull documented and evaluated all buildings that are at least 45 years old. The National Park Service recognizes the threshold of 50 years for a property to become potentially historically significant, and 45 years is a common threshold used by cultural resource management practitioners for lengthening the useful shelf life of a survey report. For each building 45 years old or older, evaluation of eligibility for listing in the California Register and as a City of Oakland Designated Historic Property was completed. The latter was completed using City of Oakland Evaluation Sheets for Landmark Eligibility All evaluations were performed by professional staff that meet or exceed the Secretary of the Interior’s Professional Qualification Standards in Architectural History.

B. EVALUATION CRITERIA

The California Register of Historical Resources

The California Register of Historical Resources (California Register) is an inventory of significant architectural, archaeological, and historical resources in the State of California. Resources can be listed in the California Register through a number of methods. State Historical Landmarks and National Register-eligible properties (both listed and formal determinations of eligibility) are automatically listed in the California Register by local governments, private organizations, or citizens. Properties can also be nominated to the California Register by local governments, private organizations, or citizens. The evaluative criteria used by the California Register for determining eligibility are closely based on those developed by the National Park Service for the National Register of Historic Places.

In order for a property to be eligible for listing in the California Register, it must be found significant under one or more of the following criteria:

Criterion 1 (Event): Resources that are associated with events that have made a significant contribution to the broad patterns of local or regional history, or the cultural heritage of California or the United States.

Criterion 2 (Person): Resources that are associated with the lives of persons important to local, California, or national history.

Criterion 3 (Architecture): Resources that embody the distinctive characteristics of a type, period, region, or method of construction, or represent the work of a master, or possess high artistic values.

Criterion 4 (Information Potential): Resources or sites that have yielded or have the potential to yield information important to the prehistory or history of the local area, California or the nation.

Integrity

The concept of integrity is essential to identifying the important physical characteristics of historic resources and hence, evaluating adverse change. For the purposes of the California Register, integrity is defined as “the authenticity of an historical resource’s physical identity evidenced by the survival of characteristics that existed during the resource’s period of significance” (California Code of Regulations Title 14, Chapter 11.5). A property is examined for seven variables, or aspects, that together comprise integrity. These aspects, which are based closely on the National Register, are location, design, setting, materials, workmanship, feeling and association. *National Register Bulletin 15, How to Apply the National Register Criteria for Evaluation* defines these seven characteristics:

- *Location* is the place where the historic property was constructed.
- *Design* is the combination of elements that create the form, plans, space, structure and style of the property.
- *Setting* addresses the physical environment of the historic property inclusive of the landscape and spatial relationships of the building/s.
- *Materials* refer to the physical elements that were combined or deposited during a particular period of time and in a particular pattern of configuration to form the historic property.
- *Workmanship* is the physical evidence of the crafts of a particular culture or people during any given period in history.
- *Feeling* is the property’s expression of the aesthetic or historic sense of a particular period of time.

- *Association* is the direct link between an important historic event or person and a historic property.

According to *California Office of Historic Preservation Technical Assistance Series #6, “California Register and National Register: A Comparison:”*

It is possible that historical resources may not retain sufficient integrity to meet the criteria for listing in the National Register, but they may still be eligible for listing in the California Register. A resource that has lost its historic character or appearance may still have sufficient integrity for the California Register if it maintains the potential to yield significant or historical information or specific data.

Thus, the California Register may include properties that have suffered a greater degree of damage to their integrity than would be acceptable for listing in the National Register, provided they are eligible for listing under Criterion 4 (Information Potential).

Evaluation Criteria for Eligibility as a City of Oakland Designated Historic Property

In order to determine whether a property is eligible for inclusion on the local register as a designated historic property, the property is rated on an Evaluation Sheet for each of fourteen evaluation criteria.² These criteria are grouped into four categories: architecture, history, context, and integrity. The ratings are then converted to numerical scores and added together for a total score, which is then converted into an overall rating—A, B, C, D, or E. An A property is of highest importance, a B property is of major importance, a C property is of secondary importance, and a D property is of minor importance. E properties are “of no particular interest.”

A property that has been altered or that is less than fifty years old may also have a contingency rating shown by a lowercase letter, indicating that the property may be eligible for a higher rating if alterations are removed or as the property becomes age-eligible in the future.

Buildings also receive a numerical rating indicating their association with a district: 1 indicates the building is in an Area of Primary Importance (API), 2 indicates that the building is in an Area of Secondary Importance (ASI), and 3 indicates that the building is not associated with a district. A “+” indicates that a building is a contributor to the district, a “-” indicates that it is not a contributor, and a “*” indicates that it is a potential contributor. (See next section for additional information about districts).

² Both the OCHS and the Landmarks Preservation Advisory Board (LPAB) criteria and evaluations determine eligibility for Oakland’s Local Register. Using either would determine if a building, structure, object, or site is eligible for the Local Register. The OCHS criteria are based on the National and California Register criteria, which has already been analyzed in the Historic Resource Evaluation. Therefore, using the LPAB criteria gives an alternate evaluation, making the analysis more comprehensive in determining which properties warrant preservation.

The City of Oakland considers properties with A, B, C, and contingency ratings of C and above to “warrant consideration for possible preservation.”³ These properties, if not already Designated Historic Properties, are classified as Potential Designated Historic Properties (PDHPs).

Evaluation for Designation as a City of Oakland Local Historic District

The Historic Preservation Element of the City of Oakland General Plan describes two levels of Preservation Districts: Class 1 Preservation Districts are all Areas of Primary Importance (API) identified by the intensive survey plus other areas that meet the “Guidelines for Determination of Preservation District Eligibility,” and Class 2 Preservation Districts are all Areas of Secondary Importance (ASI) identified by the intensive survey plus other areas that meet the “Guidelines for Determination of Preservation District Eligibility.”⁴

Areas of Primary Importance (APIs) are areas that have been identified by an intensive survey as having a high proportion of individual properties with ratings of “C” or higher. At least two-thirds of the properties within an API must be contributory to the API, i.e. they reflect the API’s principle historical or architectural themes. APIs appear eligible for the National Register of Historic Places either as districts or as historically related complexes. In general, properties with excellent or good integrity which are of the period of significance and are otherwise compatible contribute to National Register districts.

Areas of Secondary Importance (ASIs) are similar to Areas of Primary Importance except that (a) an ASI does not appear eligible for the National Register, and (b) altered properties which do not now contribute to the ASI but would if restored are counted as contributors for purposes of the two-thirds threshold. In general, properties with fair integrity may contribute to ASIs.

C. STATUS OF A BUILDING AS A HISTORICAL RESOURCE FOR CEQA

In the City of Oakland, an historical resource under CEQA is a resource that meets any of the following Thresholds of Significance:

- 1) A resource listed in, or determined to be eligible for listing in, the California Register of Historical Resources;
- 2) A resource included in Oakland’s Local Register of historical resources, unless the preponderance of evidence demonstrates that it is not historically or culturally significant;
- 3) A resource identified as significant (e.g., rated 1-5) in a historical resource survey recorded on Department of Parks and Recreation Form 523, unless the preponderance of evidence demonstrates that it is not historically or culturally significant;

³ “Summary of the Historic Preservation Element of the Oakland General Plan,” City of Oakland (adopted 1994, <http://www2.oaklandnet.com/oakca1/groups/ceda/documents/webcontent/oak035242.pdf>, accessed 22 July 2013).

⁴ Oakland General Plan, Historic Preservation Element, Chapter 4: Preservation Incentives and Regulations, Policy 2.2: Landmark and Preservation District Eligibility Criteria.

- 4) Any object, building, structure, site, area, place, record, or manuscript which the Oakland City Council determines to be historically significant or significant in the architectural, engineering, scientific, economic, agricultural, educational, social, political, military, or cultural annals of California, provided the determination is supported by substantial evidence in light of the whole record. Generally, a resource is considered “historically significant” if it meets the criteria for listing on the California Register of Historical Resources (CEQA Guidelines section 15064.5); or
- 5) A resource that is determined by the City Council to be historically or culturally significant even though it does not meet the other four criteria listed here.

A “local register of historical resources” means a list of properties officially designated or recognized as historically significant by a local government pursuant to a local ordinance or resolution, unless the preponderance of evidence demonstrates otherwise.

In March 1994, the Oakland City Council adopted a Historic Preservation Element of the General Plan (amended July 21, 1998). The Historic Preservation Element sets out a graduated system of ratings and designations resulting from the Oakland Cultural Heritage Survey (OCHS) and Oakland Zoning Regulations. The Element provides Policy 3.8: “Definition of ‘Local Register of Historical Resources’ and Historic Preservation ‘Significant Effects’ for Environmental Review Purposes” related to identifying historic resources under CEQA:

For purposes of environmental review under the California Environmental Quality Act, the following properties will constitute the City of Oakland’s Local Register of Historical Resources:

1. All Designated Historic Properties (Landmarks, Heritage Properties, Study List Properties, Preservation Districts, and S-7 and S-20 Preservation Combining Zone Properties); and
2. Those Potential Designated Historic Properties that have an existing rating of “A” or “B” or are located within an Area of Primary Importance.

The Local Register also includes properties within Areas of Primary Importance (API). An API is a district that appears eligible for the National Register of Historic Places.

Residential properties adjacent to the Children’s Hospital are listed as contributors to the 55th and Dover Residential District, but since the district is an Area of Secondary Importance (ASI), they are not considered historic resources for the purposes of CEQA based on inclusion in the ASI.

Summary of Process of Historic Resource Evaluation for CEQA Purposes

The Children’s Hospital buildings and adjacent residential and commercial buildings are evaluated in this report to arrive at two findings, which will determine whether they are considered historic resources for the purposes of CEQA:

1. Individual rating of A or B under the Oakland Designated Historic Property Criteria for Eligibility (Category 2);⁵ and
2. Eligibility for listing as an individual resource or historic district (hospital complex only) in the California Register (Category 3).

II. SUMMARY OF DETERMINATION

The A/B Wing (Baby Hospital) of the Children’s Hospital appears to be significant for its role in providing medical care and services to children and as a teaching hospital (California Register Criterion 1) as well as for its architectural merit (California Register Criterion 3). The A/B Wing was one of the earliest purpose-built hospitals for children in the East Bay, and is a building that embodies the distinctive characteristics of an early 20th-century hospital. Designed in 1926 by Edward W. Cannon, the reinforced concrete building is designed in a Northern Italian Renaissance style that features rich architectural detailing. The A/B Wing (Baby Hospital) retains integrity of location, workmanship, and association. However, integrity of design and materials is moderate and it lacks integrity of setting and feeling. Due to insufficient integrity, the A/B Wing (Baby Hospital) is not eligible for listing in the California Register of Historical Resources. Nevertheless, based on a detailed Oakland Cultural Heritage Survey (Intensive Survey) Evaluation and an evaluation for Landmark Eligibility, the A/B Wing (Baby Hospital) is eligible as an Oakland Designated Historic Property, which means that it qualifies as a historic resource under CEQA.

The B/C Wing, Bruce Lyon Memorial Research Center, and the Ford Diagnostic and Treatment Center at the Children’s Hospital do not appear to possess sufficient significance or retain integrity to be eligible for listing in either the California Register or as Oakland Designated Historic Properties. These properties do not qualify as historic resources under CEQA.

The A/B Wing and B/C Wing, when considered together as one building, are not eligible for listing in the California Register due to insufficient integrity. Based on a detailed evaluation for Landmark Eligibility, the A/B Wing and B/C Wing together are also not eligible as an Oakland Designated Historic Property. This means that they do not qualify as a historic resource under CEQA.

The magnolia tree to the east of the B/C Wing does not qualify as a historic resource under CEQA.

The other properties in the hospital complex are less than forty-five years old and do not qualify as historic resources under CEQA. These buildings include the Cardiac Catheterization Lab, Central Plant/West Site Plant, Patient Tower, Cafeteria, Helistop, Outpatient Center, and parking garage. The hospital complex as a whole does not qualify as a historic district.

None of the adjacent fourteen residential and commercial properties that were evaluated appear to be significant as individual historical resources under the criteria for eligibility to the California Register of Historical Resources. Thirteen of the properties are listed as contributors to the City of Oakland’s 55th and Dover Residential District (see Current Historic Status section below). Page & Turnbull was

⁵ Properties which may be eligible as Designated Historic Properties because they receive an A.B. or C rating from a Reconnaissance or Intensive survey are considered Potentially Designated Historic Properties.

not tasked with evaluating the district for California Register eligibility; however, based on its current status as an ASI and reconnaissance surveys and research on fourteen properties, this district does not appear to possess sufficiently significant historical context or visual themes to qualify for listing in the California Register. None of these properties appear to qualify as historic resources under CEQA.

Tables 1 and 2 below summarize Page & Turnbull’s findings for each hospital building and adjacent residential and office property. The Oakland Cultural Heritage Survey (OCHS) designations are also listed for the adjacent properties.

Table 1. Children’s Hospital Buildings within Hospital Complex

Building	California Register Eligibility	Existing OCHS Rating	Page & Turnbull ODHP Rating	CEQA Historic Resource
A/B Wing (Baby Hospital) (1926, 1962) ⁶	No	Cb+3	B3	Yes
B/C Wing (1946, 1958, 1987)	No	N/A	C3	No
A/B Wing and B/C Wing Together	No	N/A	C3	No
Ford Diagnostic and Treatment Center (1962, 1974)	No	N/A	N/A	No
Central Plant/West Site Plant (1979)	N/A	N/A	N/A	No
Patient Tower (1982)	N/A	N/A	N/A	No
Cafeteria (1987)	N/A	N/A	N/A	No
Helistop (2000)	N/A	N/A	N/A	No
Bruce Lyon Memorial Research Center (1958, 1972)	No	N/A	C3	No
Portable Buildings (Various dates)	N/A	N/A	N/A	No
Outpatient Center (1993)	N/A	N/A	N/A	No
Parking Garage (1993)	N/A	N/A	N/A	No
Bruce Lyon Memorial Research Center Addition (1992)	N/A	N/A	N/A	No
Cardiac Catheterization Lab (1993)	N/A	N/A	N/A	No
Children’s Hospital Complex as a potential historic district	No	N/A	N/A	No

⁶ Dates of original construction and renovation.

Table 2. Adjacent Residential/Commercial Properties

Address	California Register Eligibility	Existing OCHS Rating (1996)	Page & Turnbull ODHP Rating	Contributor to 55 th & Dover Residential District (ASI)	CEQA Historic Resource
682 52 nd Street	No	D2+(PDHP)	C2+	Yes	No
688 52 nd Street	No	D2+(PDHP)	C2+	Yes	No
720 52 nd Street	No	D2+ (PDHP)	C2+	Yes	No
665 53 rd Street	N/A	N/A	N/A	No	No
671 53 rd Street	No	C2+ (PDHP)	C2+	Yes	No
675 53 rd Street	No	Dc2+ (PDHP)	D2+	Yes	No
677-79 53 rd Street	No	D2+ (PDHP)	C2+	Yes	No
685-89 53 rd Street	No	Fd2* (PDHP)	D2+	Yes	No
707 53 rd Street	No	C2+ (PDHP)	C2+	Yes	No
715 53 rd Street	No	Dc2+ (PDHP)	C2+	Yes	No
5203 Dover Street	No	D2+ (PDHP)	C2+	Yes	No
5212-14 Dover Street	No	Dc2 (PDHP)	D2+	Yes	No
5225 Dover Street	No	Dc2+ (PDHP)	D2+	Yes	No
5204 MLK Way	No	D2+ (PDHP)	C2+	Yes	No

III. CURRENT HISTORIC STATUS

This section provides an overview of the national, state, and local historical ratings currently assigned to the Children’s Hospital buildings and adjacent residential and commercial properties.

A. NATIONAL REGISTER OF HISTORIC PLACES

The National Register of Historic Places (National Register) is the nation’s most comprehensive inventory of historic resources. The National Register is administered by the National Park Service and includes buildings, structures, sites, objects, and districts that possess historic, architectural, engineering, archaeological, or cultural significance at the national, state, or local level.

Children’s Hospital Buildings

None of the buildings at the study site are currently listed in the National Register. The Landmarks Preservation Advisory Board Staff Report dated May 13, 2002, indicates that the A/B Wing (Baby Hospital) in its present state is not eligible for the National Register, but notes that further research and analysis of the resource is necessary as part of the environmental review process for future proposals submitted by the Children’s Hospital and Research Center.⁷

Adjacent Residential/Commercial Properties

None of the twelve residences, one mixed-use building, and one office building adjacent to the hospital are currently individually listed in the National Register. The 55th and Dover Residential District is not listed in the National Register.

B. CALIFORNIA REGISTER OF HISTORICAL RESOURCES

The California Register of Historical Resources is an inventory of significant architectural, archaeological, and historical resources in the State of California. State Historical Landmarks and National Register-listed properties are automatically listed in the California Register. The evaluative criteria used by the California Register for determining eligibility are closely based on those developed by the National Park Service for the National Register.

Children’s Hospital Buildings

None of the buildings at the Children’s Hospital site are currently listed in the California Register.

Adjacent Residential/Commercial Properties

None of the twelve residences, one mixed-use building, and one office building adjacent to the hospital are currently individually listed in the California Register. The 55th and Dover Residential District is not listed in the California Register.

⁷ Landmarks Preservation Advisory Board Staff Report regarding the discussion of procedures for nominating properties to the Preservation Study List (pursuant to request from Oakland Heritage Alliance to add the Children’s Hospital Baby Hospital Building, 747 52nd Street, to the Preservation List Study). 5/13/2002.

C. CALIFORNIA HISTORICAL RESOURCE STATUS CODE

Properties listed or under review by the State of California Office of Historic Preservation (OHP) are assigned California Historical Resource Status Codes (CHRSCs) of “1” to “7” in order to establish a baseline record of their historical significance. Properties with a Status Code of “1” are listed in the National or California Registers. Properties with a Status Code of “2” have been formally determined eligible for listing in the National or California Registers. Properties with a Status Code of “3” or “4” appear to be eligible for listing in either Register through survey evaluation. Properties with a Status Code of “5” are typically locally significant or of contextual importance. A rating of “6” indicates that the property has been found ineligible for listing in any Register and a rating of “7” indicates that the property has not yet been evaluated or needs to be reevaluated.

Children's Hospital Buildings

According to the California Historic Resource Inventory System, the A/B Wing (Baby Hospital) received a CHRSC of “7R,” which means that the property was identified in a reconnaissance-level survey, but has not been evaluated for listing in the National or California Registers.

None of the other buildings in the complex are listed in the California Historic Resources Information System (CHRIS) database with a California Historical Resource Status Code, which means that the buildings have not been formally evaluated using the status codes.

Adjacent Residential/Office Properties

None of the twelve residences, one mixed-use building, and one office building have been individually assigned CHRSCs. The 55th and Dover Residential District received a CHRSC of “7R,” which means that the property was identified in a reconnaissance-level survey, but has not been evaluated for listing in the National or California registers.

D. OAKLAND CULTURAL HERITAGE SURVEY

The Oakland Cultural Heritage Survey (OCHS) was established in 1981. Since that time, the OCHS has been evaluating resources according to a system adapted from both the San Francisco Downtown Inventory and Harold Kalman's *The Evaluation of Historic Buildings* (Parks Canada, 1980). The categories, ratings, and guidelines for interpretation that are used by the OCHS closely parallel those presented in *National Register Bulletin 15: How to Apply the National Register Criteria for Evaluation*, Section IV, “How to Identify the Type of Significance of a Property;” and Section V, “How to Determine if a Property has Integrity.”

Children's Hospital Buildings

The OCHS assigned the A/B Wing (Baby Hospital) a preliminary rating of Cb3 based on a Reconnaissance Survey and minimal research done in 1996. The preliminary dual rating reflects uncertainty about the degree of historical and architectural integrity of the building affected by additions and alterations. The rating means that the building has secondary importance but with more information could be elevated to a rating of “B,” which would signify that the building is of major importance. The “3” rating indicates that the A/B Wing (Baby Hospital) is not located within a historic district.

None of the other buildings at the Children’s Hospital were evaluated in a Reconnaissance or Intensive Survey.

Adjacent Residential/Commercial Properties

Of the fourteen other properties within the study area, thirteen were rated in a Reconnaissance Survey in 1996. Eight are preliminarily considered contributing properties to an Area of Secondary Importance (ASI).

671 53rd Street and 707 53rd Street were each assigned an OCHS rating of C2+ in the reconnaissance survey, which means they are preliminarily considered contributing properties of Secondary Importance within Areas of Secondary Importance (ASI) or districts of local interest.⁸ These properties are considered Potentially Designated Historic Properties (PDHPs) by the City of Oakland.

5212-5214 Dover Street was assigned an OCHS rating of Dc2, and 675 53rd Street, 5225 Dover Street, and 715 53rd Street were each assigned an OCHS rating of Dc2+ in the reconnaissance survey, indicating that they are preliminarily considered contributing properties of Minor Importance within an ASI.⁹ The “c” is a contingency rating indicating that the building may be eligible for a C rating in the future if inappropriate alterations are reversed. These properties are considered PDHPs by the City of Oakland.

720 52nd Street, 5203 Dover Street, 682 52nd Street, 688 52nd Street, 677-679 53rd Street, and 5204 Martin Luther King Jr. Way were each assigned an OCHS rating of D2+ in the reconnaissance survey, which means they are preliminarily considered contributing properties of minor importance within an ASI.¹⁰ These properties are considered PDHPs by the City of Oakland.

685-689 53rd Street has an OCHS rating of Fd2*, indicating that the building has been modernized. It lies within an ASI, but is not a contributor. The “d” is a contingency rating indicating that the building may be eligible for a D rating in the future if inappropriate alterations are reversed. This property is considered a PDHP by the City of Oakland.¹¹

665 53rd Street is new construction and has not been assigned an OCHS rating.

55th and Dover Residential District

The 55th and Dover Residential District was designated an Area of Secondary Importance (ASI), or district of local interest, by the OCHS in 1996. The district boundaries encompass eight blocks with 139 contributing buildings out of a total of 146 buildings (**Figure 2**).

⁸ “City of Oakland Historic Preservation Programs.”

⁹ Ibid.

¹⁰ Ibid.

¹¹ Ibid.

55th and Dover Residential District with OCHS Preliminary Building Ratings, 1996

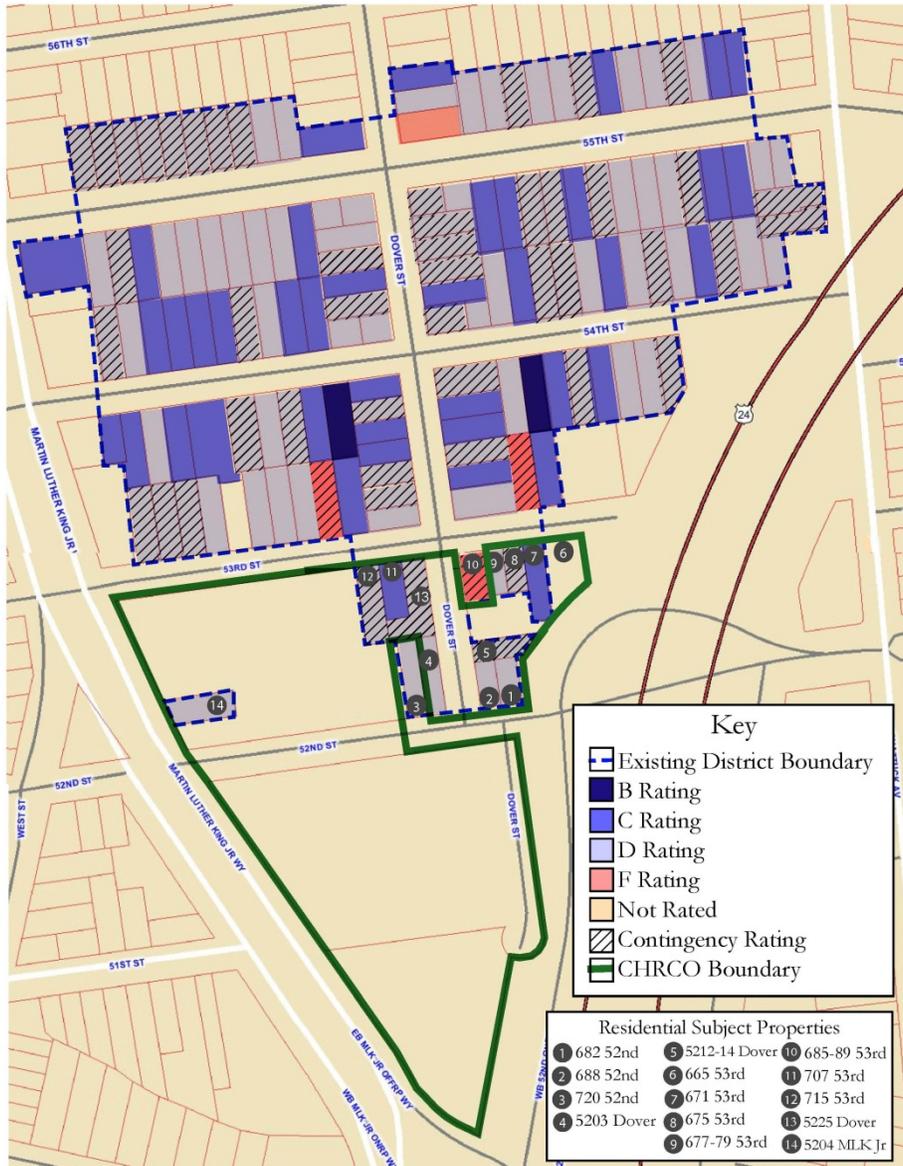


Figure 2. 55th and Dover Residential District with OCHS Preliminary Building Ratings, 1996.
Source: Page & Turnbull, 2008, revised July 2013.

Two properties in the district (657 54th Street and 711 – 713 54th Street) have been assigned an architectural rating of B, which signifies that they are of major importance and automatically qualifies them for individual listing in the City of Oakland’s Local Register of Historic Resources.¹² These

¹² “Summary of the Historic Preservation Element of the Oakland General Plan.” Under certain circumstances, demolition or incompatible alteration of these properties on the Local Register of Historic Resources cannot be carried out unless an Environmental Impact Report demonstrates that there are no feasible preservation alternatives and identifies mitigations to make up for loss of a historic resource.

properties are not included in the Children’s Hospital Master Plan and will not be affected by implementation of the Master Plan. Because a District Record (California Department of Parks and Recreation 523 D form) has not been submitted to the California Office of Historic Preservation for official review, the properties within the district have not been assigned California Historic Resource Status Codes.

The Preliminary Property List for the 55th and Dover Residential District, which was included in the Department of Parks and Recreation Primary Record Form (DPR 523A) for the district in 1996, includes thirteen of the fourteen subject properties: 682 52nd Street, 688 52nd Street, 720 52nd Street, 5203 Dover Street, 5212-14 Dover Street, 5225 Dover Street, 671 53rd Street, 675 53rd Street, 677-679 53rd Street, 685-689 53rd Street, 707 53rd Street, 715 53rd Street, and 5204 Martin Luther King Jr. Way. 665 53rd Street is evaluated in this report but was not included in the district.

E. CITY OF OAKLAND’S PROTECTED TREE ORDINANCE

A mature magnolia tree located east of the hospital’s B/C Wing is not listed in the National Register of Historic Places or the California Register of Historical Resources. It is not listed on the National or California Big Tree Registries, but is eligible for protection under the City of Oakland’s Protected Tree Ordinance. The magnolia tree meets the required diameter measurements and qualifies as a protected tree under the ordinance.

IV. HISTORIC CONTEXT

A. HISTORY OF OAKLAND

The first Native Americans that inhabited the Oakland area were known as the Ohlone. Because the Oakland area was isolated on the opposite side of the bay from the Mission San Francisco de Asis (commonly known as Mission Dolores) and the San Francisco Presidio, the Ohlone did not have regular contact with the Spanish until the construction of the Mission de San Jose in present-day Fremont in 1797.¹⁴

A Spanish expedition from Monterey explored the area around Oakland in 1772.¹⁵ Thereafter, the Spanish virtually ignored the East Bay region until 1820, when the government granted a large tract of land to Luis Maria Peralta upon his retirement from the Spanish military.¹⁶ Peralta’s grant extended from the shore of the bay, up to the crest of the Oakland hills, and from San Leandro Creek to “El Cerrito,” or the little hill (most likely Albany Hill). The grant included the area that became Oakland, which was then known as Encinal (meaning Oak Grove in Spanish). It also included the future towns of Piedmont, Berkeley, Emeryville, Alameda, Albany, and part of San Leandro.¹⁷ Peralta used the land as a cattle ranch, which he sub-divided and bequeathed to his four sons in 1842.¹⁸

The 1849 Gold Rush that dramatically influenced San Francisco’s development also brought fortune-seekers to Oakland.¹⁹ Miners, lumbermen, businessmen, bankers, speculators, and opportunists settled across the bay in what was then known as Contra Costa, or “the other coast.”²⁰ Small towns like Clinton and San Antonio (areas today located east of Lake Merritt) began developing around the businesses established by these entrepreneurs.²¹

In 1850, three men arrived in Contra Costa: Horace W. Carpentier, a 26 year-old graduate of the law school at Columbia University; Edson Adams, a 26 year-old Connecticut native; and Andrew J. Moon, a 50 year-old New Yorker.²² Each man leased 160 acres of land from Vicente Peralta and opened the area to squatters.²³ Swiss engineer Julius Kellersberger was hired to plat the land in a grid pattern starting at the shoreline. The lots were then sold, even though Carpentier, Adams, and Moon had no legal claim to the land.²⁴

¹⁴ Beth Bagwell, *Oakland: the Story of a City* (Novato, CA: Presidio, 1982), 5.

¹⁵ Lois Rather, *Oakland’s Image: A History of Oakland, California* (Oakland, CA: The Rather Press, 1972), 20, 22.

¹⁶ Bagwell, 5.

¹⁷ *Ibid.*, 10.

¹⁸ Rather, 26.

¹⁹ Historic Preservation Element, Oakland General Plan (Oakland: Oakland City Council, 1993), 1-4.

²⁰ Bagwell, 25.

²¹ Historic Preservation Element, 1-4.

²² Bagwell, 25.

²³ Rather, 35.

²⁴ Bagwell, 27.

Two years later, on March 25, 1852, the town of Oakland was incorporated.²⁵ Named for an oak grove that stretched from Lake Merritt to the bay, the city encompassed the present-day downtown area and West Oakland to 22nd Street.²⁶ The town’s citizens, who number less than 100, elected Carpentier as the city’s first mayor.²⁷

Oakland saw rapid growth and improvement after transportation connections were established with other communities.²⁸ Ferry service to San Francisco began in 1854, and San Antonio and Clinton were connected with Oakland by a bridge built in 1856. Commercial and industrial businesses were established near the wharves, and the Central Pacific Railroad ran through downtown Oakland by 1863.²⁹

In 1868, Oakland was chosen as the western terminus for the Transcontinental Railroad. Beginning in 1869, the train, a “great ‘Iron Horse’ with tireless lungs,” brought tourists and workers to California and made Oakland a major port city and manufacturing center.³⁰ West Oakland became a shipping hub for western U.S. factories and a processing and manufacturing center for raw commodities such as agricultural products and lumber. As Oakland became an increasingly popular industrial core, residential and commercial communities expanded within the city limits. In 1873, Oakland became the county seat of Alameda County.³¹ By 1880, the city’s population rose to 34,555, more than twenty times what it had been in 1860.³² Many of the new residents were San Francisco commuters drawn by Oakland’s relatively low density and the ferry service across the bay. A large demographic consisted of railroad workers, many of whom were African American.³³

Promotional materials advertised Oakland’s “world-renowned” climate, the prosperity of its citizens, its paved streets and extensive streetcar lines, and the culture found in “the Athens of America.”³⁴ It was home to several colleges, including the College of California (the precursor of the University of California, Berkeley), Mills Seminary (later Mills College), and St. Mary’s College. By 1895, the city hosted four daily newspapers, 50 churches, 14 schools, and four theaters or opera houses. Literary societies and a public library rounded out Oakland’s cultural offerings. The health of the city was served at this time by a variety of personal physicians, small benevolent institutions and medical associations, and one hospital, the Oakland Hospital and Home for Invalids, located on 12th Street between Jackson and Madison Streets.³⁵

The city expanded by annexing existing settlements and developing new districts.³⁶ Clinton, San Antonio, and the small town of Lynn (or Brooklyn) were annexed in 1872, pushing Oakland’s eastern

²⁵ *Ibid.*, 27.

²⁶ Historic Preservation Element, 1-4.

²⁷ Bagwell, 27.

²⁸ Historic Preservation Element, 1-4.

²⁹ *Ibid.*, 1-5.

³⁰ Rather, 53-54.

³¹ Historic Preservation Element, 1-5.

³² Bagwell, 59.

³³ Historic Preservation Element, 1-5.

³⁴ Rather, 63.

³⁵ Husted’s Alameda, Berkeley, and Oakland City Directory, 1895.

³⁶ Bagwell, 59.

city limits out to 36th Street.³⁷ Fruit Vale (later Fruitvale) and Jingtowntown grew around fruit orchards on the east side of the city, and Melrose, Fitchburg, and Elmhurst developed around streetcar stations in what would later be East Oakland.³⁸ The small Temescal community, located in north Oakland, expanded in the 1860s with the installation of a telegraph line down present-day Telegraph Avenue and the establishment of a streetcar line to the University of California Berkeley. Klinknerville, later Golden Gate, developed around Stanford and San Pablo avenues in North Oakland. Recreational facilities like the Tubbs Hotel and Idora Park spurred expansion into areas such as East Oakland and North Oakland. Neighborhoods north of Lake Merritt were annexed in 1891, and Temescal, Golden Gate, and other north Oakland neighborhoods were annexed in 1897.³⁹ By 1900, Oakland's population numbered almost 67,000.

The 1906 Earthquake and Fire displaced thousands of San Francisco residents to the East Bay for temporary and permanent housing. Oakland continued to grow geographically, increasing to nearly its present size by 1909, with the annexation of the hills area, Fruitvale, Melrose, Elmhurst, and the area south to San Leandro.⁴⁰ With those additions, the city's area increased from 22.9 to 60.25 square miles. Meanwhile, private developers saw an opportunity to plan communities for both the affluent and working classes in the North Oakland, West Oakland, and East Oakland neighborhoods, and parts of these areas became thoroughly family-friendly residential enclaves.

Post-earthquake development reinforced the city center at 14th Street and Broadway. The First National Bank of Oakland (now the Broadway Building), the Oakland Bank of Savings, the Security Bank Building, the Oakland Hotel, and the Federal Realty Building (now the Cathedral Building) were constructed in this area between 1907 and 1914. Oakland's City Hall was the first city hall in the United States designed as a skyscraper.⁴¹ Other civic projects included the Civic Auditorium, new fire stations, and parks throughout the city.⁴²

In 1910, the City of Oakland assumed control of its waterfront, which previously had been held by private entities. The change of ownership prompted the expansion of the Port of Oakland. The increased presence of the port, combined with the rail network and its geographic position, boosted the city to a leading industrial and warehousing center.⁴³ During World War I, Oakland's shipyards provided a "fleet of steel and concrete ships that...within the short space of a year put the Oakland estuary in the national limelight."⁴⁴ By 1918, at least 50,000 people were employed by the shipyards.

The 1920s saw continuing prosperity in Oakland.⁴⁵ Civic works abounded, including the installation of a new lighting system and procurement of land for an airport. Several automobile manufacturers

³⁷ Historic Preservation Element, 1-5.

³⁸ *Ibid.*, 1-6.

³⁹ *Ibid.*, 1-7.

⁴⁰ *Ibid.*, 1-7.

⁴¹ *Ibid.*, 1-7.

⁴² *Ibid.*, 1-8.

⁴³ *Ibid.*

⁴⁴ Florence B. Crocker, *Who Made Oakland?* (Oakland: Clyde Dalton, 1925), quoted in Rather, 87.

⁴⁵ Rather, 89.

established assembly plants in East Oakland, making Oakland “the Detroit of the West.”⁴⁶ The city was proclaimed “One of the Nation’s Richest, Greatest Communities” in 1929.

Development slowed during the Great Depression, but Oakland grew into a major shipbuilding center during World War II.⁴⁷ The city’s population expanded with wartime workers, including many African Americans who migrated from the South. The Bay Bridge, which opened in 1936, eased the commute between Oakland and San Francisco and probably attracted more residents to Oakland. In 1945, the city’s population was 405,301.

After the war, the Port of Oakland continued to grow, largely because of its ability to capitalize on the rise of containerized shipping. This shipping method was compatible with the Port’s large landholdings, spacious waterfront, and access to rail and truck transportation routes, which the older, more crowded Port of San Francisco could not offer.⁴⁸ By the late 1960s, Oakland had the second largest container port in the world.⁴⁹

Transportation also directly impacted Oakland’s physical development. The postwar emphasis on the automobile led to increased development in the suburbs and new freeways to reach these outlying areas.⁵⁰ While freeway construction and redevelopment enticed some businesses and residents away from the city center, in many cases businesses and residents were forced into relocation as historic commercial and residential fabric in downtown and West Oakland disappeared. Increased economic and racial segregation were byproducts of this freeway and redevelopment orientation, and through the 1960s and 1970s Oakland experienced infrastructure decline associated with entrenched poverty, deindustrialization, and a weak urban tax base.⁵¹

A tight real estate market in San Francisco in the early 1980s sparked new development and preservation projects in Oakland, especially downtown.⁵² Homebuyers began seriously considering Oakland neighborhoods, many of which retained strong local character.⁵³ The 1989 Loma Prieta earthquake damaged many of Oakland’s older stock, but the city’s population has remained steady throughout the 1990s and 2000s and was recorded as 395,817 in 2011.⁵⁴

B. TEMESCAL NEIGHBORHOOD HISTORY

Oakland’s Temescal neighborhood is bounded roughly by 40th Street on the south, 55th Street on the north, Broadway on the east, and Martin Luther King Jr. Way (formerly Grove Street) on the west.⁵⁵ The Temescal commercial district ranges along Telegraph Avenue with the intersection of Telegraph

⁴⁶ Historic Preservation Element, 1-8.

⁴⁷ Ibid., 1-9.

⁴⁸ Michael Corbett with Marjorie Dobkin, William Kostura. “National Register of Historic Places Registration Form: Port of San Francisco Embarcadero Historic District,” January 2006, 21.

⁴⁹ Corbett, 43.

⁵⁰ Historic Preservation Element, 1-9.

⁵¹ Robert O. Self, *American Babylon: Race and the Struggle for Postwar Oakland* (Princeton, NJ: Princeton University Press, 2003)

⁵² Bagwell, 260-262.

⁵³ Ibid., 263.

⁵⁴ United States Census.

⁵⁵ Historic boundaries have shifted as a result of freeway construction.

Avenue and 51st Street serving as the hub of the neighborhood. State Route 24, constructed in 1968-69, is accessed from several on-ramps around 51st Street and Shattuck Avenue. These on-ramps create some geographic divisions within the Temescal neighborhood, but also connect the neighborhood with the rest of the city and areas beyond.

Native Americans of the Ohlone tribe were Temescal's earliest residents. An Ohlone village probably existed near the present-day intersection of 51st Street and Telegraph Avenue, by the banks of Temescal Creek.⁵⁶ The neighborhood's name comes from this period and refers to the *temescals*, or sweat houses, that the Ohlone built along the creek.

As described previously, Luis Maria Peralta's Mexican land grant, which encompassed the Oakland area, was divided among his four sons. The present-day areas of Central and North Oakland, Emeryville, and Piedmont were bequeathed to Vicente Peralta.⁵⁷ In 1836, Vicente built an adobe house on a parcel now bounded by Telegraph Avenue, 55th Street, Vicente Way, and State Route 24.⁵⁸ The Gold Rush brought opportunistic settlers to the East Bay, and Peralta sold or surrendered most of his land to squatters by 1853.⁵⁹

Solomon Ellsworth Alden, a Connecticut native who owned a successful San Francisco restaurant, settled west of present-day Telegraph Avenue in 1852.⁶⁰ Alden acquired land along the road, eventually holding 600 acres between 44th and 60th streets.⁶¹ He began subdividing the land along Telegraph around 1868, perhaps in anticipation of the streetcar line that was built the following year.

Alden's subdivision developed into a commercial district along Telegraph Avenue, supported by the horse-drawn streetcar that ran from downtown Oakland to Berkeley by 1873 and the Oakland-Sacramento telegraph line, which was strung down Telegraph Avenue and gave the street its name.⁶² By 1873, the population of the village of Temescal numbered 1,000 and the village featured stores, restaurants, dairies, and banks.⁶³

Early Temescal was a blue-collar community of carpenters, farmers, and laborers.⁶⁴ The local Lusk Canning Company, which opened in 1868, was one of the largest canning factories in the world by 1885. It employed 800 people, both adults and children, during the height of the canning season.⁶⁵ In its heyday, the factory was located on Claremont Avenue just north of the intersection of Claremont and Telegraph Avenue.⁶⁶ Many Temescal residents also worked in the streetcar barn at 51st Street and

⁵⁶ Historic Preservation Element, Oakland General Plan (Oakland City Council, 1993), 1-3.

⁵⁷ Diane Reinbolt Judd, "Early Days in Temescal" (Term paper at Laney College, June 1980), 2.

⁵⁸ *Temescal Album*, 9.

⁵⁹ Judd, 3.

⁶⁰ Theodore Grover Wurm, "Our Northern Suburb of Temescal" (Oakland: s. n., 1991), 4; Judd, 4.

⁶¹ *Temescal Album*, 11.

⁶² *Temescal Album*, 12; Jeff Norman, *Temescal Legacies: Narratives of Change from a North Oakland Neighborhood* (Shared Ground, 2006), 1.

⁶³ *Temescal Album*, 16.

⁶⁴ Judd, 7.

⁶⁵ *Ibid.*, 5; *Temescal Album*, 18.

⁶⁶ Wade Fox, "Traces of the Past in Temescal" (<http://loadofcrock.blogspot.com/2005/12/traces-of-past-in-temescal.html>, accessed 12 May 2008).

Telegraph Avenue, and it was common for women to work in cigar factories and laundries.⁶⁷ A number of garbage collectors operated in the area and in 1907, they consolidated into the Oakland Scavenger Company.⁶⁸

The 1880s and 1890s saw an influx of Italian immigrants to the neighborhood.⁶⁹ The Bilger Quarry just east of Temescal was known to have employed newly arrived Italian immigrants, many of whom resided in Temescal.⁷⁰ Many immigrants bought their first homes in the area, and a strong Italian community developed. Longstanding institutions from this heritage include Sacred Heart Church at 40th Street and Martin Luther King Jr. Way, the Genova Delicatessen and Ravioli Factory at Telegraph Avenue and 51st Street, and the Colombo Club on Claremont Avenue.⁷¹ The Colombo Club was established as a social club by Bilger Quarry workers.⁷²

In 1897, just after residents voted to change the town's name to Alden in honor of its founder, Temescal was annexed by the growing city of Oakland.⁷³ At the turn of the 20th century, Temescal was still a relatively self-contained community, with several small dairies, four movie houses, a post office, and a store.⁷⁴ Idora Park, an amusement park that boasted the largest roller-skating rink on the West Coast, was established in 1903 between Shattuck and Telegraph avenues and 56th and 58th streets.⁷⁵

For a long time, the area's commerce focused on the streetcars and trains that ran down Telegraph and Shattuck avenues, and Grove, 40th, and 55th streets, in keeping with the area's genesis as a streetcar corridor (**Figure 3**).⁷⁶ The residential streetcar suburb continued to develop through the 1910s and 1920s, largely with bungalows and Craftsman style single family residences. The postwar emphasis on automobiles and increasing community frustration with noisy, dirty railways led to the closure or relocation of streetcar and railway lines in the late 1940s and 1950s.⁷⁷

⁶⁷ Wurm, 5; *Temescal Album*, 23.

⁶⁸ Wurm, 6.

⁶⁹ Judd 2.

⁷⁰ *Ibid.*, 20.

⁷¹ Bagwell, 90.

⁷² Fox.

⁷³ Wurm, 19; Norman, 1.

⁷⁴ Wurm, 6.

⁷⁵ Bagwell, 148; Fox.

⁷⁶ Norman, 38.

⁷⁷ Wurm, 8.



Figure 3. Telegraph Avenue in Temescal, 1889.
Source: Oakland Public Library

In 1958, transportation authorities approved plans for a freeway intended to connect Contra Costa County with I-880.⁷⁸ The community fought against the plans, which required the demolition of many residential blocks in Temescal and disrupted commercial districts on Grove Street, Telegraph Avenue, and College Avenue. Despite opposition, however, the first stretch of the Grove-Shafter Freeway (State Route 24) opened in 1969.⁷⁹ The freeway divided the commercial stretch on Telegraph from the residential areas to the west, such as the neighborhood around the Children’s Hospital (**Figure 4**). The transportation corridor of Grove Street (Martin Luther King Jr. Way) also changed significantly during this era. Prior to the 1960s, Line 3 of the Key Streetcar System ran along Grove Street at street level, connecting downtown Oakland to North Berkeley. Construction of the Bay Area Rapid Transit (BART) system in the 1960s saw this thoroughfare cast into the shadow of elevated tracks, visually and permanently changing the scale of traffic in the neighborhood.

⁷⁸ Mellana, quoted. in Norman, 76.

⁷⁹ Norman, 68.



Figure 4. Grove-Shafter Freeway under construction in 1968, also showing elevated BART tracks to the upper right. The Children's Hospital site is at center right.
Source: Oakland Museum Collection.

The new freeway depressed property values in Temescal. Many children of long-time residents moved out of the neighborhood and many homes were sold. Those that remained in Temescal were often elderly residents, a demographic whose eventual attrition contributed to the neighborhood's steady decline.⁸⁰ African Americans, who were no longer tied to West Oakland's war industries and government-sponsored housing, were able to afford homes in Temescal and supplanted the neighborhood's predominantly Italian community.⁸¹ In more recent years, young professionals attracted to the affordability, character, and diversity of Temescal have purchased homes in the neighborhood.

C. CHILDREN'S HOSPITAL

Administrative History

In 1911, Bertha Wright, a visiting nurse for the Collegiate Alumnae Association of Alameda County, formed a group called the Baby Hospital Association with the mission to explore the establishment of a hospital specifically designed for infants and children under the age of five.⁸² Although the city of San Francisco had a children's hospital, there was no such organization in the East Bay. The high death rates for young children at the turn of the 20th century, which stood at over ten percent for newborns and children younger than two, catalyzed the formation of the association.⁸³

⁸⁰ Glinernick, quoted. in Norman, 92; Raymond Mellana, quoted. in Norman, 77.

⁸¹ Norman, 98-99.

⁸² Meeting Minutes 1913. [Children's Hospital Medical Center Collection, Carton 1: Records 1912-1978, Folder 1. Available at the Bancroft Library.]

⁸³ I. Loudon, *Death in Childbirth: An International Study of Maternal Care and Childbirth 1800-1950* (Oxford, Oxford University Press, 1992) 46.

The Baby Hospital Association held its first meeting at the First Congregational Church in Oakland on September 11, 1912. By April 1913, the Association was officially established, with a board of female officers including prominent Oakland resident Mrs. Allen Babcock as president and Oakland resident and social worker Miss Mabel Weed as first vice president.⁸⁴ The mission of the Baby Hospital of Alameda County, said to be the first and only of its kind in the state of California, was to care for sick babies regardless of creed, nationality or race. The association was affiliated with the Certified Milk and Baby Hygiene Committee, the Association of Collegiate Alumnae, and was endorsed by the Commission of Public Charities of Berkeley. The organization’s thirty founding members acted as the female board of managers, while a male board of directors and building committee were formed to select a site for a hospital building. The Oakland Children’s Hospital organizational bylaws were based on those established by the Hospital for Babies in Waltham, MA, the Children’s Hospital in San Francisco, and the Orthopedic Hospital of Seattle.⁸⁵

In 1912, the Baby Hospital Association purchased a large Queen Anne-style building known as the McElrath mansion, located on 51st Street between Grove Street (now Martin Luther King Jr. Way) and Telegraph Avenue, to house their new hospital. The residential building immediately underwent renovations for use as a hospital facility, and a clinic was established in the carriage house on the property where patients were treated while these renovations were taking place. Beginning in 1913, the clinic held a baby hygiene class twice a month and clinics for sick babies were offered on Monday, Wednesday, and Friday mornings as well as in the afternoons of the first and third Mondays of the month.⁸⁶ That year, the clinic treated a total of 450 children and conducted 1,100 office visits and 2,425 home visits. The program was funded by the Baby Hospital Association and cost \$2,000. On September 16, 1914, the Baby Hospital in the McElrath mansion was dedicated. Hospital staff initially consisted of head nurse and hospital superintendent Therese A. Von Heygendorff, a day nurse, a night nurse, a secretary, a cook, and a Japanese houseboy (**Figure 5**).

⁸⁴ “Baby Hospital is Organized”, *The Berkeley Daily Gazette*, September 11, 1912.

⁸⁵ Murray Morgan, *The Hospital Women Built for Children* (Oakland, CA: Children’s Hospital Medical Center, 1967).

⁸⁶ *Ibid.*, 18.



Figure 5. Nurses and patients in front of the newly dedicated Baby Hospital, 1914. Source: *The Oakland Tribune* photograph archives, accessed online at <http://photos.mercurynews.com/>.

By 1914, the number of children treated at the Baby Hospital had increased from 450 to 611 and the death rate at the facility, which was quite good for the time, was 7.1 percent. The clinic, which continued to operate out of the carriage house on the McElrath property, had 6,093 patient visits and began prenatal classes that year. Baby Hospital Association founder Bertha Wright and an assistant, Emma Roberts, ran the clinic. The hospital costs that year were nearly \$2,000 a month and patients, of whom fewer than ten percent paid in full, made up only about \$400 of that fee. Alameda County and the City of Oakland pledged to give a total of \$400 a month, if the hospital in turn provided pediatrician training services. Resident physicians were introduced to the hospital as early as the 1920s.⁸⁷

Despite the assistance from the local government, there remained a \$1,200 operational gap. Women's clubs called "Branches" raised the difference by hosting lunches, fashion shows, and sales. In 1922, 972 patients were treated and the average hospital stay was 22 days. Of these visits, 58% were free and approximately 30% were partially paid, bringing operational expenses that year to \$46,124, with hospital and clinic income totaling \$11,587. Alameda County and the City of Oakland contributed \$12,000. The Branches were tasked with raising the remaining \$22,537. At this time, the Baby Hospital Association learned that they would need to build a new masonry hospital building to meet building codes.⁸⁸ The President of the Board of Managers, Anita Jensen, appealed to the Community Chest of Oakland, which did not generally administer funding for member groups, to finance the new hospital. Financial strain increased when Alameda County Supervisors informed the Baby Hospital Association that after construction of the new Highland County Hospital was complete, it would no longer provide financing for the Baby Hospital.

⁸⁷ Ibid., 95.

⁸⁸ Ibid., 53.

Despite financial struggles, the Association was able to secure loans to build a new hospital building in 1926.⁸⁹ The Association selected Oakland architect Edward W. Cannon, who designed a state-of-the-art steel frame and reinforced concrete hospital.⁹⁰ The L-shaped building was designed in a “Northern Italian Romanesque” style and reflected the latest social and hygiene theory in hospital design. In 1928, the hospital (now known as the A/B Wing) was dedicated. Shortly thereafter, the first male President of the Board, William Harold Oliver, re-organized the hospital administratively under a single board.⁹¹ With these administrative changes, Oliver eliminated those who had previously been elected to the Hospital Board as figureheads rather than as active participants. In 1930, the Baby Hospital’s name was changed to the Children’s Hospital of the East Bay to reflect the hospital’s broader clientele, which now included children as old as fourteen years of age.

The County Board of Supervisors continued to contribute to the financing of the Children’s Hospital of the East Bay because the hospital agreed to offer pediatric training that was unavailable at the new County Hospital. Area hospitals assigned three-month pediatric courses for student nurses at the Children’s Hospital and the County Hospital requested that their interns serve for a period of six weeks. The Children’s Hospital of the East Bay provided room and board for its medical interns in residential cottages that abutted the hospital site.⁹² County financing continued until 1932, when the County was forced to cut their funding in half because of the Depression; however, in 1934, funding was again stabilized.

Throughout the hospital’s history, the Branches, or women’s fundraising organizations, have largely provided financial support. The Branches were so called in honorific reference to the branches of the stately magnolia tree located on the Hospital grounds, adjacent to the McElrath mansion. In 1933, during the Depression, the Children’s Hospital of the East Bay had eighteen Branches with a total of approximately 500 members. Branches typically began the year with ten dollars in petty cash and competed with one another to raise money to transfer to the Baby Hospital Association at the end of the year. An Executive Committee ensured that Branches did not have events that were too similar to one another and provided organizational support. Minnie Culver Oliver, the wife of Board President William Oliver, was president of the branches from 1933 until 1958.

In 1940, under the leadership of William Oliver, the Hospital paid off its \$123,000 mortgage.⁹³ As Oakland’s population grew during World War II, the patient demand on the Children’s Hospital of the East Bay likewise increased. In 1946, a new wing (now known as the B/C Wing) was constructed to replace the outmoded and undersized McElrath mansion. In the 1950s, under the presidency of Thad McCarty, the Stanford Research Institute was commissioned to study the hospital and make recommendations regarding its program and location. The resulting studies recommended a continuing emphasis on the hospital’s teaching role and increased specialization through research.

⁸⁹ Deed of Trust between the Baby Hospital Association and the Bank of Oakland on October 5, 1926 for real property improvements, \$75,000. #W84857. A second Deed of Trust was issued for \$125,000. [Children’s Hospital Medical Center Collection, Box 4: Deeds & Legal Documents, Folder 1. Available at the Bancroft Library.]

⁹⁰ Morgan, 54.

⁹¹ Articles of Incorporation and Bylaws: As Amended 1930/46. [Children’s Hospital Medical Center Collection, Box 1: Records 1912-1978, Folder 5. Available at the Bancroft Library.]

⁹² Morgan, 49.

⁹³ “Children’s Hospital of the East Bay Mortgage Paid Off” (*San Francisco Chronicle* 23 January 1941), 8.

Consequently, several areas of specialty were developed at this time, including a cleft palate team, seizure clinic, polio clinic, and orthopedic clinic. In 1958, the Bruce Lyon Memorial Research Laboratory was built on the southern portion of the hospital site. Research began in 1959 with a staff of five people. In 1973, the Northern California Comprehensive Sickle Cell Center was established at the Bruce Lyon Memorial Research Center. In 1986, the Bruce Lyon Memorial Research Laboratory was incorporated as a nonprofit subsidiary of the hospital and took on a new identity as Children’s Hospital Oakland Research Institute (CHORI).⁹⁴ About the same time that the Research Center was founded, a neurologic diagnostic clinic, phenylketonuria clinic, Cystic Fibrosis Research Foundation, birth defects center, and diagnostic and treatment center were developed.

The hospital continued to expand over the next twenty years. Buildings were expanded as stories were added to the labs and research facilities, and the hospital’s name was changed to the Children’s Medical Center of Northern California to reflect its regional medical expertise. Construction of a patient tower (1982) and an outpatient building (1993) significantly increased the size of the hospital complex. Today, the hospital is known as the Children’s Hospital and Research Center Oakland; it remains a private medical facility.

Physical Development of Hospital Complex

In 1852, Solomon and Ann Ellsworth Alden purchased land and a small cottage from W. B. Gould, located between 44th and 60th streets in Oakland.⁹⁵ Solomon Alden was a wealthy restaurateur and is credited with the original settlement of the Temescal area, which bore his name prior the turn of the 20th century.⁹⁶ An 1877 illustration shows the Alden property, which had been expanded to include a two story Italianate structure surrounded by mature plantings and a large barn, constructed ca. 1855 (**Figure 6**). In 1860, women in the Alden family planted a magnolia tree next to their house which still stands on Children’s Hospital grounds.⁹⁷ Alden began subdividing his land in 1868, but the subject property remained in Alden’s ownership until much later, likely due to the fact that the Alden residence was located on the property. Solomon Alden died in 1881, and the Alden property passed into ownership of his daughter Elsie Alden.

⁹⁴ Ibid.

⁹⁵ “The Knave”, *The Oakland Tribune*, September 30, 1962.

⁹⁶ “National Register of Historic Places in Alameda County”, adapted from National Register of Historic Places nomination #96000105 (Alden Branch of the Oakland Free Library), 1996. Accessed online at <http://www.nationalregisterofhistoricplaces.com/CA/alameda/state3.html>

⁹⁷ Dedication plaque at the base of the magnolia tree.

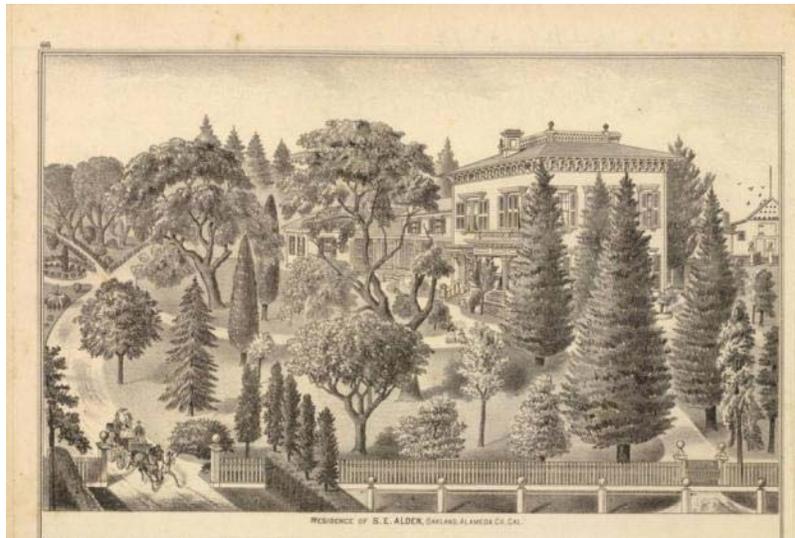


Figure 6. Residence of Solomon Alden, published in Thompson and West, Index Map of Oakland, 1878. Source: The David Rumsey Map Collection.

In 1875, Elsie Alden married Oakland attorney John McElrath, and the couple moved to the Alden family property in Temescal. Between 1878 and the turn of the 20th century, a large Queen Anne-style house was constructed on the property, which came to be known as the McElrath mansion and seems to have replaced the earlier Italianate structure. The sprawling two-and-one-half story home contained 20 rooms.⁹⁸ On the 1911-1912 Sanborn Fire Insurance Map, the house is shown at the center of the large lot at 52nd and Dover Streets with residential tracts to the north, west, and south; the building’s primary façade faced south onto 51st Street. The magnolia tree that the Alden women planted in 1860 was preserved and can be seen in undated photographs located in front of the primary entrance to the new McElrath mansion (**Figure 7**). The McElraths had twelve children and resided at this house until John McElrath died in 1907.



Figure 7. McElrath mansion before it was purchased by the Baby Hospital Association in 1912, showing magnolia tree at right. Source: Murray Morgan, *The Hospital Women Built for Children* (Children’s Hospital Medical Center: Oakland, 1967).

⁹⁸ *Temescal Album*, 11.

In 1912, the Baby Hospital Association formed to develop a clinic and hospital specifically for the treatment of infants and children under the age of five. To house the new hospital facility, the Association purchased the McElrath property in December 1912 with the required down payment of \$6,500 towards the total \$12,500 sale price.⁹⁹

While the main house was being remodeled for hospital use in June 1913, the Baby Hospital Association opened a medical clinic in the McElrath carriage house. Renovations on the main house included: re-plastering and painting of the interior; the addition of utility rooms and plumbing improvements; the enlargement of the water system and improvement of the electrical wiring.¹⁰⁰ The Baby Hospital opened in 1914; however, it was not long before the hospital outgrew the McElrath mansion. The President of the Board of Managers, Anita Oliver Jensen, stated in a Baby Hospital Association Annual Report that the “old building is neither adequate to our needs nor suited to the intelligence of our work.” To secure funding from the City of Oakland, the Baby Hospital agreed to provide room and board for medical interns from Alameda County to practice at the Baby Hospital for six-week periods.¹⁰¹ Additional impetus for building improvements came in 1925, when Oakland City officials informed the Baby Hospital Association that their wood frame hospital building violated building code because it was not fireproof masonry. In response, Jensen toured hospitals in the East and Midwest collecting ideas for new hospital designs, and an additional property was purchased adjoining the original site on Grove Street.¹⁰²

In 1926, a brick-clad steel frame and reinforced concrete building was constructed adjacent to the McElrath mansion to serve as the main hospital. The 1926 Baby Hospital Association Annual Report featured a description of the new hospital, an L-shaped building designed by architect Edward W. Cannon and constructed with a steel frame and reinforced concrete for fireproofing (**Figure 8**). The building was designed in a “Northern Italian Romanesque” style and clad with light buff brick cladding and terra cotta ornaments. The report notes that, “an appropriate touch is to be found in the charming Della Robbia bambino, in colored terra-cotta, over the entrance arch; this was brought from Italy by a member of the Hospital Board.”¹⁰³ The primary entrance was located at the south façade of the building, while an ambulance entrance was located at the north façade, necessitating the purchase of adjoining land and the construction of a driveway to access 52nd Street.¹⁰⁴

⁹⁹ Morgan.

¹⁰⁰ Morgan.

¹⁰¹ *Ibid.*, 49.

¹⁰² Morgan, 54.

¹⁰³ *Ibid.*, 55.

¹⁰⁴ Deed between William and Marion Battenhouse and the Baby Hospital Association. 10/13/1926. [Children’s Hospital Medical Center Collection, Box 4: Deeds and Legal Documents, Folder 16. Available at the Bancroft Library.]

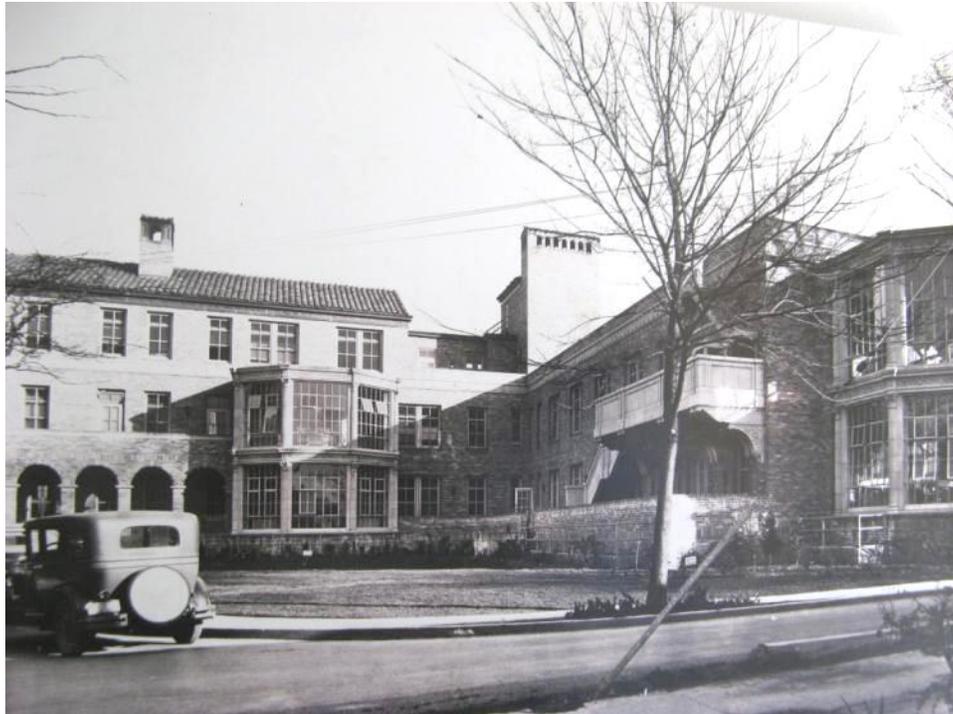


Figure 8. The Baby Hospital shortly after its construction in 1926.
Source: Oakland Children's Hospital Archives.

By 1930, the name of the Baby Hospital was officially changed to the Children's Hospital of the East Bay.¹⁰⁵ The name change reflected both a shift in the age of children treated at the facility, which now accepted children through the age of fourteen, and also expressed the prominence of the hospital within the greater geographic region. Starting in the 1930s, the Hospital leased a cottage located at 721 51st Street (no longer extant). From approximately 1933-1958, this building, which was rented from sisters Helen Julia Shafter and Mary Severence Shafter and known as the Shafter Cottage, served as the headquarters of the Children's Hospital Branches fundraising group and as living quarters for the superintendent of nurses.¹⁰⁶

With the East Bay's population increase during World War II, the hospital's patient load also grew. Between 1941 and 1945, the patient load increased dramatically, from 10,000 to 245,000.¹⁰⁷ In response, between 1942 and 1957, the Children's Hospital's board aggressively pursued a program called "Operation Facelift," starting with the purchase from private owners of lots and houses surrounding the hospital complex on Grove Street (now Martin Luther King Jr. Way), 52nd Street, and Dover Street. Ownership of these lots and houses would enable the hospital complex to physically expand and meet growing patient demand.

¹⁰⁵ Dorothy Larimer Boyd. "Women Build a Hospital for Children," Special Commemorative Issue Celebrating Yesterday and Today (*bambino: Children's Hospital Medical Center of Northern California*, September 1982).

¹⁰⁶ *Ibid.*

¹⁰⁷ *Ibid.*

In 1945, Children's Hospital hired the architecture firm of Stone and Mulloy to design a master plan for hospital expansion.¹⁰⁸ The firm specialized in hospital design, and the plan they developed reflected contemporary advances in the field of hospital design, including flexibility of construction schedule, and interior spaces that facilitated department cooperation. Work subsequently began on the first portion of the proposed master plan, which necessitated the demolition of the thoroughly outmoded McElrath mansion. The B/C Wing was added to the existing Baby Hospital building (which came to be called the A/B Wing at this point), changing the hospital's overall configuration from an L-shaped plan to a U-shaped plan (**Figure 9**). Contractor Elmer J. Freethy signed an agreement with the hospital to "furnish all of the materials and perform all of the work shown on the drawings in the specifications entitled Alterations and Additions to the Children's Hospital of the East Bay at 51st and Dover Streets." The Alden family magnolia tree was preserved, and stood just east of the new B/C Wing. The new wing was dedicated on October 17, 1948.¹⁰⁹ It appears that a small third-story addition was also constructed at the northeast corner of the A/B Wing about this time.

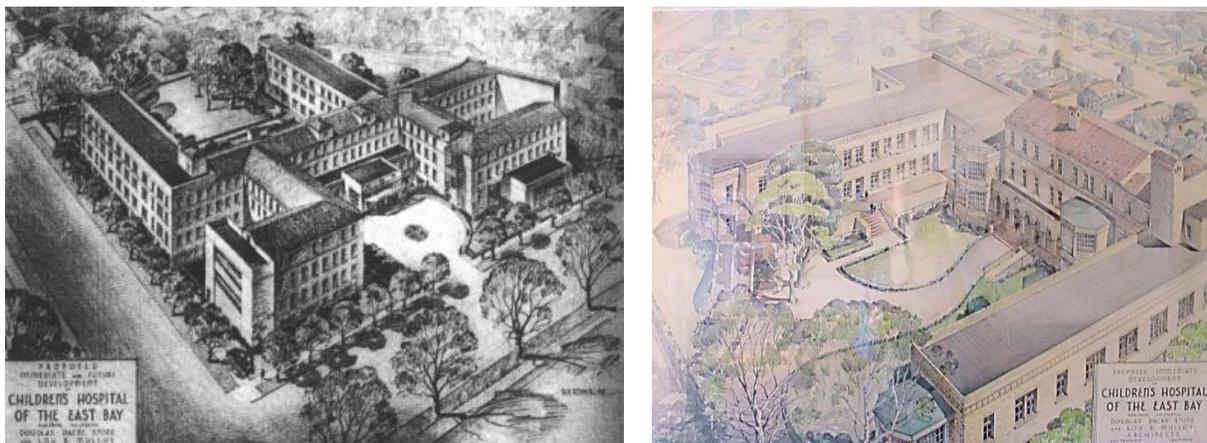


Figure 9. Master plan for Children's Hospital at left (view southwest with 52nd Street at lower right), and Hospital expansion (B/C Wing) as proposed (similar to but not exactly as constructed) at right. Designed by Stone and Mulloy.

Source: *Architect and Engineer*, December 1945.

Meanwhile, many of the houses on 52nd Street, north of the hospital property, were sold to a trust company which relocated the buildings. The residences on the portion of the block south of 51st Street and bounded by Grove and Dover streets were purchased by the hospital. These houses were demolished and the parcels were paved for surface parking. The 1951 Sanborn Fire Insurance Map identifies remaining houses located along Grove Street as student nurse residences.¹¹⁰ Another cottage retained by the hospital was utilized for open heart surgery research in 1957—a research endeavor that led to the Hospital's first open heart surgery on April 15, 1959.¹¹¹

¹⁰⁸ "The Children's Hospital of the East Bay: Douglas Dacre Stone and Louis B. Mulloy, Architects" (*Architect and Engineer*, December 1945), 16-17.

¹⁰⁹ Agreement between Elmer J. Freethy and the Children's Hospital of the East Bay, August 6, 1946. [Children's Hospital Medical Center Collection, Box 4: Deeds & Legal Documents, Folder 4. Available at the Bancroft Library.]

¹¹⁰ 1951 Sanborn Fire Insurance Map.

¹¹¹ Morgan.

In the 1950s and 1960s, new buildings were constructed on the land acquired by the hospital and the complex continued to expand. This expansion did not proceed according to the Stone and Mulloy master plan, perhaps reflecting advances in hospital design that outpaced what Stone and Mulloy had attempted to plan for. However, the hospital did retain the services of the Stone and Mulloy firm, called by this time Stone, Marraccini and Patterson, for the design of new buildings at the site. On September 10, 1959, the Bruce Lyon Memorial Research Laboratory, constructed on the southern portion of the hospital property, was dedicated.¹¹² On September 23, the William H. and Helen C. Ford Diagnostic and Treatment Center, which was made possible by a gift of almost \$450,000 from the Fords, was dedicated.¹¹³ The Ford Diagnostic and Treatment Center housed the outpatient departments, laboratory, x-ray, and other facilities.

The front entrance and lobby of the A/B Wing (Baby Hospital) was also expanded and remodeled in 1962, and third story additions were built at the A/B Wing and the B/C Wing.¹¹⁴ A driveway from Grove Street was also paved at this time, providing a path between the hospital offices and nurses' housing along Grove Street. In 1963, a larger dormitory for housing nurses was constructed at the corner of 52nd and Grove streets.¹¹⁵ The hospital's name was changed to the Children's Hospital Medical Center of Northern California in 1964.¹¹⁶ The construction of the Grove-Shafter freeway in 1968-69 hemmed in any potential Hospital expansion to the east, and curtailed vehicular access to the A/B Wing (Baby Hospital).

In the 1970s, several additions were made to the hospital complex and approval for larger additions was granted. A large second floor, designed by Stone Marraccini and Patterson, was added to the Bruce Lyon Memorial Research Center in 1972. A third floor to the Ford Diagnostic and Treatment Center was added in 1974, and the West Site Plant was constructed adjacent to the west façade of the B/C Wing in 1979.¹¹⁷ Both were designed by Kaplan/McLaughlin. At this time, city government approval was received for a new hospital building at the intersection of 52nd and Grove streets, which would adjoin the 1946 B/C Wing. Tax-free bonds from the City of Oakland provided twenty-three million dollars for construction funding.¹¹⁸ The new five-story patient care facility, designed by KMD and known as the Patient Tower, opened in this location on September 12, 1982.¹¹⁹ This addition reoriented the hospital complex so that it fronted north onto 52nd Street and further curtailed vehicular and visual access to the historic A/B Wing and the B/C Wing.

In 1987, a Cafeteria was designed by Ratcliff Architects and constructed between the Patient Tower and the West Site Plant. A one-story build-out, designed by Jim Jennings Architecture, was also added to the B/C Wing's east façade at this time, enclosing the building's original porch.¹²⁰ Trailers

¹¹² Boyd.

¹¹³ Ibid.

¹¹⁴ Rutherford & Chekene. SB 1953 Seismic Evaluation: Children's Hospital of Oakland, Vol. 1 of 3. Prepared for Office of Statewide Health Planning and Development, December 2000.

¹¹⁵ Boyd.

¹¹⁶ Ibid.

¹¹⁷ Rutherford & Chekene.

¹¹⁸ Boyd.

¹¹⁹ "Come Join Our Celebration," Special Commemorative Issue Celebrating Yesterday and Today (*bambino: Children's Hospital Medical Center of Northern California*, September 1982).

¹²⁰ Rutherford & Chekene.

that contain offices were most likely placed on the west side of the B/C Wing and south side of the West Site Plant sometime in the 1980s.¹²¹

A second addition to the Bruce Lyon Memorial research Center was designed by Paul O. Finwall & Associated and constructed at the southernmost tip of the Hospital site in 1992. The Cardiac Catheterization Laboratory, located at the southeast corner of the Ford Diagnostic and Treatment Center, was designed by James Davis Architects and completed in 1993.¹²² In the same year, a new Outpatient Center and parking garage structure were built on the north side of 52nd Street.¹²³ The Outpatient Center was designed by Anshen + Allen, and the parking garage was designed by The Ratcliff Architects.

Hospital Site Construction Chronology

1850s

1852: Solomon and Ann Ellsworth Alden purchase the land between 44th and 60th streets. An existing wood frame dwelling on the property is expanded to a two-story Italianate residence. Beginning in 1868, Alden subdivides his land into residential tracts.¹²⁴

1860s

1860: Women in the Alden family plant a magnolia tree next to their home.

1870s-1890s

1878-1899: Between 1878 and the turn of the 20th century, a two-and-one-half story Queen Anne-style house was constructed on the property and seems to have replaced the earlier Italianate structure. The house contained 20 rooms and was located at the center of the large lot at 52nd and Dover Street, with the primary façade facing south onto 51st Street. The magnolia tree that the Alden women planted in 1860 was preserved and the property came to be known as the McElrath mansion.

1910s

1912: The Baby Hospital Association purchases the McElrath mansion.¹²⁵ The 1911-12 Sanborn Fire Insurance Map shows the mansion located on a parcel with residential tracts to its north, west, and south.¹²⁶ **(Figure 10).**

¹²¹ Exact construction dates were not located; the suggested date range is based on site visits in April and May of 2008.

¹²² Rutherford & Chekene.

¹²³ Environmental Science Associates, Inc. “Final Addendum to the Draft EIR: Children’s Hospital Medical Center Environmental Impact Report,” Prepared for the City of Oakland Planning Department. May 1990.

¹²⁴ *Temescal Album*, 11.

¹²⁵ Morgan.

¹²⁶ 1911-1912 Sanborn Fire Insurance Map.

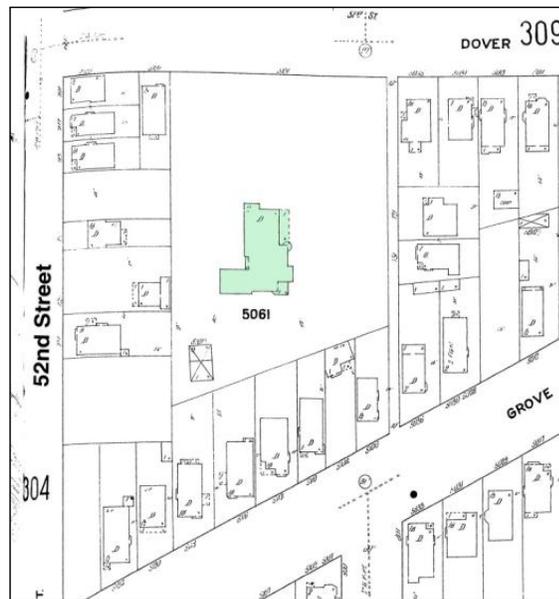


Figure 10. 1911-12 Sanborn Fire Insurance Map. The McElrath mansion that initially housed the Baby Hospital is highlighted in green. The carriage house located on the property contained the medical clinic until renovation of the mansion was complete in 1913.

1913: The Baby Hospital Association opens a medical clinic in the McElrath carriage house in June, during the renovation of the McElrath mansion.¹²⁷

1920s

1922: The Baby Hospital agrees to provide room and board for medical interns in Alameda County to practice at the Baby Hospital for a period of six weeks in exchange for funding from the City of Oakland for a new hospital building.¹²⁸

1925: Oakland City officials inform the Baby Hospital Association that the wood-frame mansion-turned-hospital violates building code, because it is not fireproof masonry. In response, additional property along Grove Street is purchased adjacent to the McElrath mansion.¹²⁹

1926: New Baby Hospital building constructed. Designed by Berkeley architect E.W. Cannon, the L-shaped building had a steel frame and reinforced concrete for fireproofing. The building features a “Northern Italian Romanesque” style with light buff brick cladding and terra cotta ornamentation (**Figure 11**).¹³⁰

¹²⁷ Morgan.

¹²⁸ *Ibid.*, 49.

¹²⁹ Morgan, 54.

¹³⁰ *Ibid.*, 55.



Figure 11. 1930 Sanborn Fire Insurance Map. Baby Hospital complex outlined, including the L-shaped building constructed in 1926. McElrath mansion remains and houses the hospital's clinic.

1930s

1930: The Baby Hospital is officially renamed the Children's Hospital of the East Bay.¹³¹

1933: The nearby Shafter cottage bungalow at 721 51st Street becomes the Children's Hospital Branches fundraising headquarters and remains so until 1958.¹³² The cottage also housed the superintendent of nurses during this period.¹³³

1940s

1940: The mortgage for the Baby Hospital building is paid off.¹³⁴

1941-1945: In response to the development of the East Bay during World War II, the hospital's patient load grows from 10,000 in 1940 to 24,500 in 1945. The architecture firm of Stone and Mulloy, which specialized in hospital construction, develops a new master plan for the hospital.¹³⁵

1946-1948: Contractor Elmer J. Freethy begins constructing a new hospital wing in 1946. Designed by architects Douglas Dacre Stone and Lou B. Mulloy, the two-story addition (now known as

¹³¹ Boyd.

¹³² Ibid.

¹³³ Letter dated October 15, 1936 from Helen and Mary Shafter.

¹³⁴ "Children's Hospital of the East Bay: Mortgage Paid Off."

¹³⁵ Ibid., 87.

the B/C Wing) is dedicated on October 17, 1948.¹³⁶ A small addition to northeast corner of the third story of the A/B Wing (Baby Hospital) also took place about this time.¹³⁷

1950s

1951: Housing for student nurses, located along 52nd Street, is identified on the 1951 Sanborn Fire Insurance Map (**Figure 12**).¹³⁸

1957: Between 1942 and 1957, the hospital’s board purchases the lots and houses surrounding the hospital complex on Grove, 51st, 52nd, and Dover streets. Many of the houses are sold to a trust company that relocates the buildings. The cleared land initially serves as a parking lot.¹³⁹

1959: The hospital’s first open heart surgery is performed on April 15.¹⁴⁰ In September, the Bruce Lyon Memorial Research Laboratory is constructed on the southern portion of the block.¹⁴¹

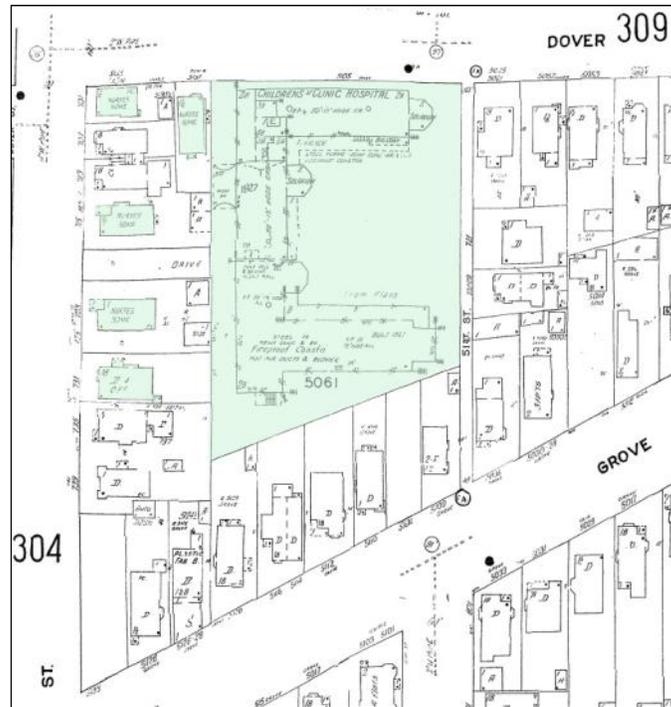


Figure 12. 1951 Sanborn Fire Insurance Map. The hospital property is highlighted in green. The McElrath mansion has been replaced by the B/C Wing, and several of the cottages in the surrounding neighborhood (highlighted) served as office space and housing for nurses.

¹³⁶ “Agreement between Elmer J. Freethy and the Children’s Hospital of the East Bay.”

¹³⁷ Stone and Mulloy Rendering, Children’s Hospital, Oakland.

¹³⁸ 1951 Sanborn Fire Insurance Map.

¹³⁹ Morgan.

¹⁴⁰ Ibid.

¹⁴¹ Boyd.

1960s

1962: The William H. and Helen C. Ford Diagnostic and Treatment Center is dedicated in September.¹⁴² The front entrance and lobby of the original Baby Hospital wing are remodeled.¹⁴³ Third story additions at the northeast corner of the third story of the A/B Wing (Baby Hospital) and the north portion of the B/C Wing also took place about this time.

At this time, a driveway from Grove Street is paved. By this time, all parcels bordering 52nd Street are hospital-owned (**Figure 13**).¹⁴⁴

1963: A T-shaped nurses' dormitory is constructed at the corner of 52nd and Grove streets.¹⁴⁵

1964: The hospital's name is changed to the Children's Hospital Medical Center of Northern California.¹⁴⁶

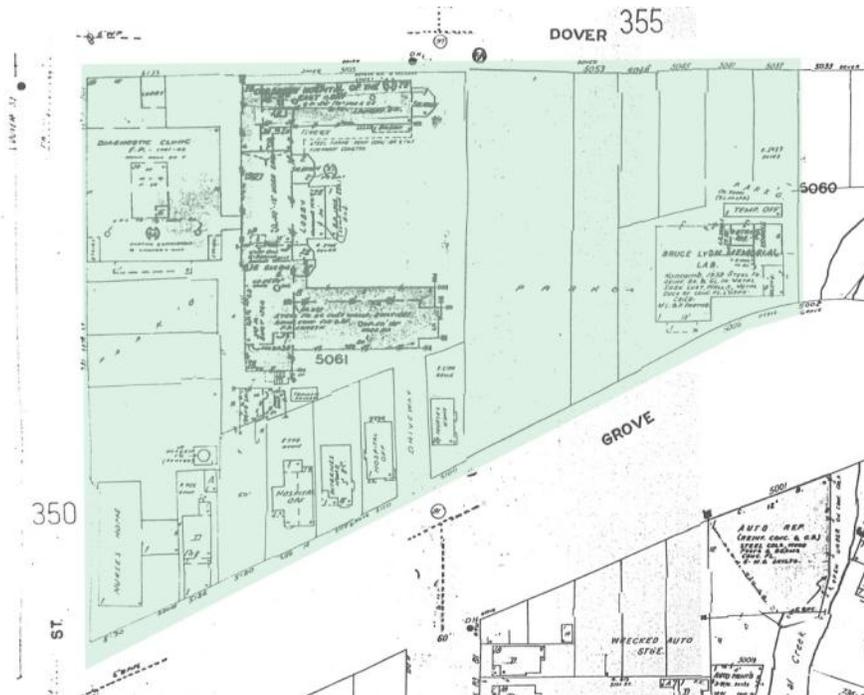


Figure 13. 1969 Sanborn Fire Insurance Map.

The Children's Hospital Complex is highlighted in green. The front entrance and lobby of the original hospital have been remodeled, the Bruce Lyon Memorial Research Laboratory and the Ford Diagnostic and Treatment Center have been constructed, and parking has been added to the north and south.

1970s

¹⁴² Ibid.

¹⁴³ Rutherford & Chekene.

¹⁴⁴ 1967 Sanborn Fire Insurance Map.

¹⁴⁵ Boyd.

¹⁴⁶ Boyd.

1972: Second story to the Bruce Lyon Memorial Research Center is completed.

1974: Construction of the third-floor addition to the Ford Diagnostic and Treatment Center is completed.¹⁴⁷

1979: The West Site Plant (Central Plant) for the hospital is constructed adjacent to the west façade of the B/C Wing.¹⁴⁸ The city government approves a new hospital building at the intersection of 52nd and Grove streets, and \$23 million for construction funding is secured through City of Oakland tax-free bonds.¹⁴⁹

1980s

1980s: Trailers containing offices are most likely added west of the B/C Wing and south of the West Site Plant in the 1980s.¹⁵⁰

1982: A new five-story patient care facility, the Patient Tower, opens on September 12. With this addition, the main entrance of the complex is reoriented north toward 52nd Street.¹⁵¹

1987: Several additions are made to the hospital complex, including a cafeteria constructed between the Patient Tower and the West Site Plant, and an addition to the West Site Plant. The porch on the east side of the B/C Wing is enclosed by a one-story addition.¹⁵²

1990s

1992: Construction of the addition to the Bruce Lyon Memorial Research Center is completed.

1993: Construction of the reinforced masonry Cardiac Catheterization Laboratory, located between the A/B Wing (Baby Hospital) and the Ford Diagnostic Clinic and Treatment Center, is completed.¹⁵³ A new Outpatient Center and parking garage structure are built north of 52nd Street.¹⁵⁴

Baby Hospital Expansion within the Temescal Neighborhood

As the Baby Hospital Association established itself within the community, it moved from its original location in the McElrath mansion to a purpose-built hospital building and continued to build additions and auxiliary buildings over the years. Because the hospital was initially located in a former residence and the property was surrounded by other residential properties, the hospital purchased the dwellings immediately surrounding it in order to expand. These cottages and bungalows, primarily constructed between 1900 and 1930, were adapted for hospital use, relocated, or demolished. The following section describes the effects of the hospital’s expansion on the surrounding Temescal

¹⁴⁷ Rutherford & Chekene.

¹⁴⁸ Ibid.

¹⁴⁹ Boyd.

¹⁵⁰ Exact construction dates were not located; the suggested date range is based on site visits in April and May of 2008.

¹⁵¹ “Come Join Our Celebration.”

¹⁵² Rutherford & Chekene.

¹⁵³ Rutherford & Chekene.

¹⁵⁴ Environmental Science Associates, Inc. “Final Addendum to the Draft EIR.”

neighborhood, from the construction of the first hospital building in 1926 to the construction of a parking garage structure in the mid-1990s.

The 1911-12 Sanborn Fire Insurance Map shows the McElrath mansion and carriage house surrounded primarily by one and two-story frame dwellings. 51st Street, which was a mere alleyway at only ten feet in width, bordered the southern edge of the subject lot.

The Baby Hospital Association first expanded into the residential tracts immediately surrounding the hospital in 1926, when the Baby Hospital was constructed east of the McElrath mansion. The new hospital building was constructed within the boundaries of the McElrath parcel, but lacked connection to the street. Therefore, a residential parcel on 52nd Street was purchased from William and Marion Battenhouse and paved to serve as a driveway from 52nd Street to the new building.¹⁵⁵

By the 1930s, the hospital rented some of the dwellings immediately surrounding the Baby Hospital. Letters between Clare Billet and William Oliver of the Children's Hospital and Helen and Mary Shafter indicate that the hospital leased the Shafter cottage at 721 51st Street, located directly south of the Baby Hospital building. The 1930 Sanborn Fire Insurance Map indicates that the carriage house that once contained the original clinic had been demolished by that time and that the McElrath mansion was connected to the Baby Hospital building. A storage facility and dwelling had also been constructed on the northern portion of the parcel by this time.

The 1951-52 Sanborn Fire Insurance Maps show that construction of the B/C Wing was complete. The McElrath mansion was no longer standing on the parcel and several dwellings on 52nd Street served as nurses' residences and hospital offices. The block bounded by 51st Street on the north, Dover Street on the east, Temescal Creek on the south, and Grove Street on the west contained seventeen single-family dwellings, a duplex, and a low-rise apartment building with three units.

Between 1942 and 1953, the hospital purchased additional residential lots so that it could continue to expand in response to its increased patient load. Properties purchased included: 5131 Dover Street, 5139 Grove Street, and residences at 707, 713, 715, 723, and 731 on 52nd Street.¹⁵⁶ The removal of these properties after 1951 gave the Hospital a greater street presence along 52nd Street.

In 1957 and 1958, the residential properties south of the hospital complex were purchased and the area was paved for surface parking. This change also increased the Hospital's street presence, as it was now visible from the southern approach on Grove Street. Eight properties on Grove Street and two on Dover Street were purchased, and the hospital also acquired one property on 52nd Street.¹⁵⁷

The 1969 Sanborn Fire Insurance Map shows the Ford Diagnostic Clinic and Treatment Center located at the northeast corner of the hospital complex. With the exception of one residence at 5122

¹⁵⁵ Deed between William and Marion Battenhouse and the Baby Hospital Association. 10/13/1926. [Children's Hospital Medical Center Collection, Box 4: Deeds and Legal Documents, Folder 16. Available at the Bancroft Library.]

¹⁵⁶ Title policies, deeds and other data relating to real property 1942 - 1953. [Children's Hospital Medical Center Collection, Box 4: Deeds and Legal Documents, Folder 3. Available at the Bancroft Library.]

¹⁵⁷ Parking Lot Properties. [Children's Hospital Medical Center Collection, Box 4: Deeds and Legal Documents, Folder 5. Available at the Bancroft Library.]

Grove Street, all residences surrounding the hospital were denoted as nurses' housing or hospital offices. A new T-shaped nurses' dormitory was located at the northwest corner of the hospital complex. 51st Street no longer bisected the subject block and the southern portion of the hospital complex had been paved for surface parking. The Bruce Lyon Memorial Laboratory appears on the southern portion of the site.

By 1982, all residential buildings along the south side of 52nd Street had been removed and the Patient Tower constructed at the southeast corner of 52nd and Grove streets. The Patient Tower included a diagonal setback, a circular drive, and an entry atrium, design cues which oriented the Hospital to the intersection of 52nd and Grove streets. In the mid-1980s, the Hospital expanded north by purchasing several properties on the block bounded by 52nd Street to the south, Dover Street to the east, 53rd Street to the north, and Grove Street (by this time renamed Martin Luther King Jr. Way) to the west. Trust companies purchased some of the properties, including 665 and 663 53rd Street, and the Children's Hospital of the East Bay purchased other properties, such as 671 53rd Street, directly from the property owners.¹⁵⁸ A parking garage structure and Outpatient Tower were constructed on the block north of the main hospital building in 1993.

Hospital Design

Prior to the turn of the 20th century, hospitals were not widely used. Generally, doctors made house calls to those who could afford them, and the poor and indigent were treated in almshouses run by religious organizations or philanthropic charities. Larger hospital campuses began to be constructed around the turn of the century in response to advances in epidemiology, and were often situated on large sites in rural areas to promote healing and to prevent the spread of disease. Urban public hospitals developed after the turn of the 20th century, in conjunction with the expansion of population, infrastructure, and commerce in American cities. As medical technology and education improved, more people started using public medical facilities, and hospitals needed more sophisticated facilities to perform operations, research diseases, and provide better patient care. Hospital campuses were often master-planned to expand in phases and stages, to accommodate the high cost of growth and changing medical practices.

The University of Virginia Hospital is an excellent example of hospital building evolution (**Figure 14**). The University had a number of different medical buildings on its campus beginning in 1826, but it was not until the turn of the 20th century that the University called for the construction of a modern hospital. The main hospital building was constructed in 1901 by architect Paul Pelz, whose design scheme also provided a master plan for the future growth of the hospital. Based on this plan, wings flanking the main building were added in 1905 and 1907. The successful hospital soon became overcrowded, prompting the addition of a series of wings, including the Steele Wing in 1916, the McIntire Wing in 1924, and the Teachers' Prevention Wing in 1928—all connected by corridors.

¹⁵⁸ Deeds between the American Savings and Loan and the Federal National Mortgage Association to the Children's Hospital Medical Center of Northern California, 11/7/1985 and 11/7/1985. Deed between James and Jewell Pierce to the Children's Hospital Medical Center of Northern California. 3/5/1986. [Children's Hospital Medical Center Collection, Box 4: Deeds and Legal Documents, Folder 8. Available at the Bancroft Library.]

Since then, the University of Virginia Hospital has been further expanded into a large modern medical campus with facilities for teaching and research.¹⁵⁹



Figure 14. University of Virginia Hospital, circa 1929.

Source: University of Virginia, "UVA Hospital celebrating 100 years,"

www.healthsystem.virginia.edu/internet/library/historical/uva_hospital/centennial/ (accessed 4 May 2007)

The design plan for many early hospitals included a series of narrow ward buildings, based on sanitary and practical principles advocated during the 19th century by the influential nurse Florence Nightingale. Nightingale also believed that hospitals should be no more than two stories high because buildings taller than this interfered with sunlight and ventilation, elements understood to expedite the healing process.¹⁶⁰ A narrow, open layout of wards made them easy to clean and ideal for monitoring a maximum number of patients by a minimum number of nurses. This division of space also allowed for a separation of uses, and hospitals were able to dedicate each wing to a specific function. The "Nightingale ward" became a standard of hospital construction in the late 19th and early 20th centuries. As medical practice changed and the general public began to demand more privacy, these open-plan wards were converted into double-loaded corridors with single patient rooms. After 1940, hospital design began to incorporate these new interior spatial needs, and the modern "block plan" design began to emerge.¹⁶¹

On the West Coast, evidence of these trends can be seen at San Francisco General Hospital (**Figure 15**), which was established on its current site in the city's Potrero District in 1872. The site was selected because of the availability of land and the temperate climate in the district; a two-story wood frame building replaced several earlier city hospital buildings scattered throughout the city. The hospital struggled with overcrowding as the city's population continued to expand, and in 1908 the hospital was condemned and demolished due to an outbreak of the plague. In 1915, a new hospital complex was constructed on the site by City Architect Newton J. Tharp. The main hospital plan consisted of ward buildings flanking each side of a central administration building; a receiving building, a nurses' home, emergency hospital, laundry building, and power plant were added along the perimeter of the landscaped site in subsequent years. The new hospital was clad in brick and terracotta to fireproof the structure and to curb the spread of contagious diseases like tuberculosis. The design incorporated the Nightingale wards, standard for hospitals of the time. The master plan

¹⁵⁹ University of Virginia, "UVA Hospital Celebrating 100 Years"

(www.healthsystem.virginia.edu/internet/library/historical/uva_hospital/centennial/, accessed 4 May 2007).

¹⁶⁰ Gary A. Noskin and Lance R. Peterson. "Engineering Infection Control through Facility Design," *Emerging Infectious Diseases*. March – April 2001. Vol. 7, No. 2.

¹⁶¹ John D. Thompson and Grace Goldin, *The Hospital: A Social and Architectural History* (New Haven: Yale University Press, 1975).

for the site was designed to allow progressive expansion and additions so that the Hospital could adapt to changing demographics and medical practices.¹⁶²



Figure 15. San Francisco General Hospital under construction, 1913.
Source: San Francisco Public Library Historical Photograph Collection.

The A/B Wing (Baby Hospital) at the Children’s Hospital embodies early 20th-century hospital design trends. The two- and three-story building is narrow and linear in form and is clad in brick and terracotta to fireproof the structure and prevent the spread of contagious disease. Oriented to the south to maximize its exposure to sunlight, the building includes solariums and windows to ensure light and airflow. The floor plan also contains a large open-plan ward to allow nurses to maintain surveillance of the maximum number of patients at one time. Although constructed at a later time when linear hospital designs were beginning to be replaced by modern blocks, the B/C Wing mirrored the plan of the A/B Wing (Baby Hospital). Subsequently, the Ford Diagnostic and Treatment Center, constructed in 1962, is an example of the modern block hospital construction that broke away from the earlier 20th century designs. In this way, the main building complex of the Children’s Hospital represents both early and later hospital design in Alameda County and California.

Architects of the Children’s Hospital

This section includes biographical information about the architects who designed the buildings at the Children’s Hospital site that are more than 45 years old.

Edward W. Cannon (1884-1942)

Architect Edward W. Cannon was born in Oakland in 1884 and grew up in West Oakland. As a teen he worked as a machinist, and in 1909 married Wildridge Corinne Adams. By 1910 he was employed

¹⁶² Page & Turnbull, Inc., “San Francisco General Hospital: Historic Resource Evaluation” (San Francisco: unpublished report, 2003).

as an architectural draftsman,¹⁶³ and in July 1911 was elected to membership of the San Francisco chapter of the American Institute of Architects.¹⁶⁴ During this time Cannon was a designer at the architectural firm of C. W. Dickey, a Bay Area and Honolulu-based architect whose work from this era includes three branches of the Oakland Public Library (including the Alden [Temescal] branch), the Homestead Loan Association Headquarters Building on University Avenue in Berkeley, and Kahn's Department Store (now the Rotunda Building) at 12th Street and Broadway in Oakland. Dickey's 1912 design for Kahn's Department Store was a four-story Y-shaped building with a dramatic glass dome crowning the Y-intersection. Edward Cannon later added a six story addition to this building in 1923 when he was practicing independently. The Kahn Department Store was listed in the National Register of Historic Places in February 1989.¹⁶⁵

After 1915, C. W. Dickey moved his office to Honolulu, and Cannon began independent practice. His office was located in the Central Bank Building on 14th Street at Broadway. He is credited during this era with several single-family residential projects in Oakland and Piedmont; vacation cabins in outlying areas; medium-sized apartment buildings in Berkeley and Oakland, including 666 17th Street, 1705 Martin Luther King Way, and 1106 Madison; and a light industrial furniture factory at 221 Oak Street which has received Oakland Heritage Property Designation.¹⁶⁶ At the time of its construction in 1923, his design for the six-story addition to Kahn's Department Store appears to have been his largest contribution to Oakland's built environment, followed three years later by his largest stand-alone project, the design for the Baby Hospital.

Cannon continued to live and work in Oakland through the 1930s, and in 1937 was appointed one of several superintendents of construction at the Port of Oakland.¹⁶⁷ He died in Oakland on January 1, 1942, at the age of 58.¹⁶⁸

Douglas Stone of Stone and Mulloy

Architect Douglas Dacre Stone (1897-1969) was born in Yokohama, Japan on March 10, 1897 and received his Master's degree in architecture from the University of California at Berkeley in 1922.¹⁶⁹ He began his career as a designer for the firm Hyman and Appleton Architects in San Francisco in 1924. Stone founded the firm of Stone and Mulloy Architects with Louis B. Mulloy (1910-1963) in 1927. The firm became known for their hospital designs, and designed approximately twenty hospitals and medical buildings in Northern California in the post-war era, including Peralta Hospital in Oakland (1950), Eden Hospital in Castro Valley (1954), and Pacific Presbyterian Medical Center in

¹⁶³ United States Federal Census, 1910, accessed at www.ancestry.com.

¹⁶⁴ *Architecture and Building*, Volume 43, Number 15, November 1911, 20.

¹⁶⁵ "Kahn's Department Store, National Register of Historic Places Registration Form". Prepared by Mary Hardy and Alice Carey, June 8, 1988.

¹⁶⁶ *Ibid.*, and *Western Architect*, May 1920, and *Architect and Engineer of California and the Pacific Coast*, Volume 44, 1916, and "Prevention Institute Receives Heritage Property Designation", <http://www.preventioninstitute.org/about-us/our-building.html>.

¹⁶⁷ "Regular Meeting of the Board of Port Commissioners of the Port of Oakland, January 4, 1937", accessed online, http://www.portofoakland.com/pdf/board/1937_minutes.pdf.

¹⁶⁸ "Edward W. Cannon Obituary", *The Oakland Tribune*, January 2, 1942.

¹⁶⁹ "Designer of Hospitals Retires" (*San Francisco Chronicle* 12 September 1965), 12.

San Francisco (1960).¹⁷⁰ Douglas Stone was also involved in the design of the Federal Office Building in San Francisco, as well as the State Motor Vehicles Office Building in Sacramento.

Stone was appointed to the San Francisco Planning Commission in 1941 and also served as consultant to the State Hospital Advisory Council in 1943. A member of the California Chapter of the AIA, Stone was a member of various hospital associations including the International Hospital Federation. The firm of Stone and Mulloy was selected to design the master plan for Oakland Children's Hospital, and in 1946 they designed and oversaw construction of the Hospital's first major addition, the B/C Wing. Prior to his retirement in 1967, Stone spent five months traveling between Moscow, Kiev, and Leningrad displaying a model of the El Camino Hospital in Mountain View as part of the United States Information Agency's "Medicine USA" exhibit. Stone died on February 21, 1969.¹⁷¹

Stone, Marraccini and Patterson

In 1951, Silvio P. Marraccini (1918-1970) joined Stone and Mulloy, at which time the firm was renamed Stone, Mulloy and Marraccini Architects. Norman Patterson (1917-1990) joined the firm in 1955 and by 1956 the firm had been renamed Stone, Marraccini and Patterson.¹⁷² Stone, Marraccini and Patterson are responsible for the design of both the Bruce Lyon Memorial Research Center (1958) and the Ford Diagnostic and Treatment Center (1962) at the Children's Hospital.

Stone Marraccini and Patterson continued to design hospital and medical buildings through the 1970s and 1980s, and in 1997 merged with SGH Incorporated, one of the nation's largest architectural and engineering firms.¹⁷³

¹⁷⁰ California State Department of Parks and Recreation Primary Record, Sutter Medical Center, Castro Valley, prepared by ESA Consultants, January 2009.

¹⁷¹ "Architect Douglas D. Stone Dies" (*San Francisco Chronicle* 22 February 1969), 30.

¹⁷² "Stone, Douglas Dacre," ArchitectDB – Architect Record (<https://digital.lib.washington.edu/php/architect/record.phtml>, accessed 8 May 2008).

¹⁷³ "SHG Incorporated and Stone Marraccini Patterson Architects Announce Merger", PR Newswire, September 7, 1997.

V. CHILDREN'S HOSPITAL ARCHITECTURAL DESCRIPTIONS

This section provides an overview of the Children's Hospital study site and a description of all buildings at the site. More detailed architectural descriptions are provided for buildings that are more than 45 years old.

A. SITE DESCRIPTION

The Children's Hospital study site is roughly triangular and is bounded by 53rd Street to the north, the Grove Shafter Freeway (State Route 24) and Dover Street to the east, an exit ramp from the freeway to the south, and Martin Luther King Jr. Way to the west (**Figure 16**). The main façade and the primary entrance to the Hospital complex faces northwest onto 52nd Street and is part of the Patient Tower. The Ford Diagnostic and Treatment Center sits to the east of the Patient Tower, at the southwest corner of 52nd and Dover streets; its primary façade faces east. A pedestrian overpass links the Patient Tower to the Outpatient Center, which is located north of 52nd Street and adjoined by the Parking Structure at the northern perimeter of the site. The Cafeteria and the Central Utility Plant are located to the south of the Patient Tower and are both oriented to the west. The A/B Wing (Baby Hospital) and the B/C Wing are conjoined in a south-facing U-plan, and together sit east of the Central Plant and south of the Patient Tower and the Ford Diagnostic and Treatment Center. The A/B Wing (Baby Hospital) and the B/C Wing form a courtyard with a circular drive. A large magnolia tree grows in the courtyard east of the B/C Wing. The Cardiac Catheterization Lab is located between the Ford Diagnostic and Treatment Center and the A/B Wing (Baby Hospital), at the east perimeter of the site. A Helistop sits to the south of the courtyard and the entrance to the A/B Wing (Baby Hospital). The Bruce Lyon Memorial Research Center is located south of the helistop, with the Research Center Addition at the southernmost triangular end of the hospital parcel. The site includes eight portable buildings south of the B/C Wing and east of the Bruce Lyon Memorial Research Center.

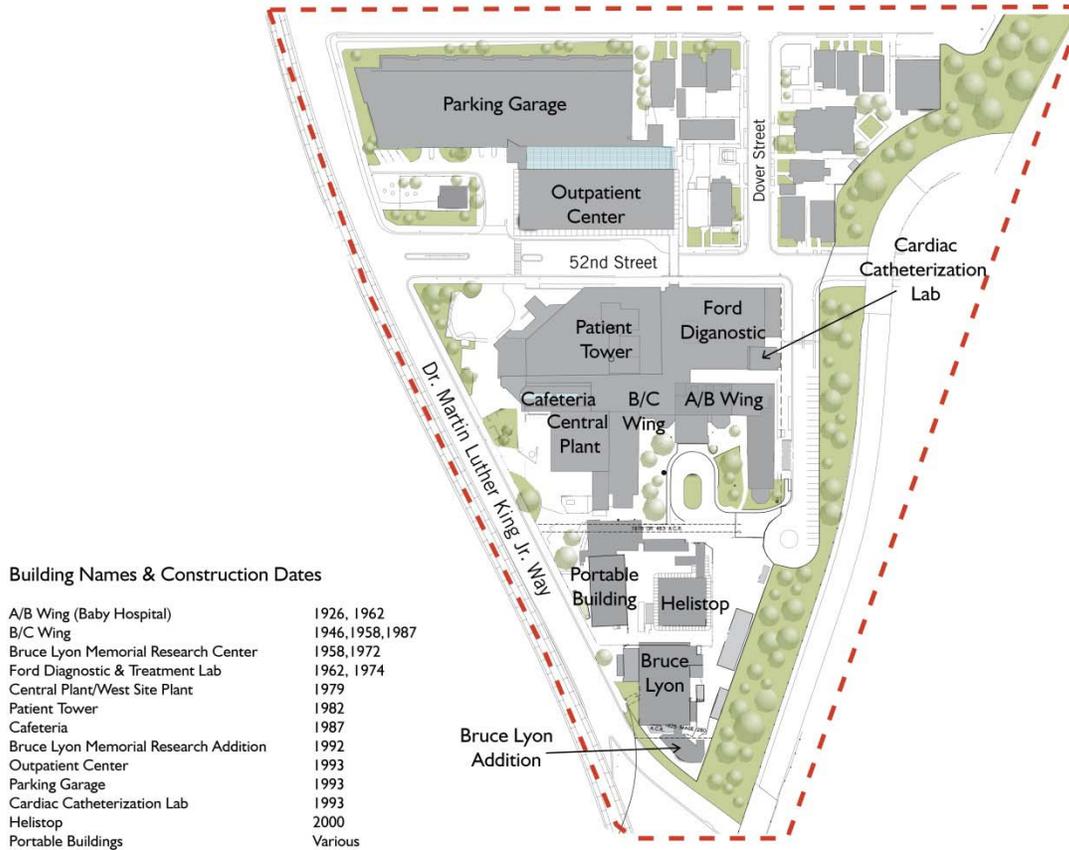


Figure 16. Site diagram of the Children’s Hospital and Research Center.
Source: Children’s Hospital Zoning Pre-Application Presentation, Taylor and HDR, edited by Page & Turnbull, 2013.

B. A/B WING (BABY HOSPITAL) (1926, ADDITIONS CA. 1948 AND 1962)

Exterior

In 1926, architect Edward W. Cannon designed a combination two- and three-story over exposed basement, brick-clad, reinforced concrete hospital building in the Northern Italian Renaissance style (Figure 17). The building was purpose-built to house the Baby Hospital, which had previously been housed in a converted Victorian mansion on the site. The A/B Wing (Baby Hospital) has an L-shaped plan that frames the north and east sides of a courtyard located to the southwest of the building. The ell that is oriented on the east-west axis is three stories in height and capped by a gable roof, while the ell that is oriented on the north-south axis is two stories in height and capped by a flat roof. An elevator penthouse and wide brick chimneys surmounted by arcaded Romanesque caps protrude from the roof where the two ells meet. An additional chimney is located at the middle of the east-west ell. Typical fenestration on the building consists of paired two-over-two, double-hung, wood-sash windows with multi-light awning transoms and brick lintels. All facades are adorned with a terra-cotta frieze featuring a circle-and-sheaf motif. The foundation of the building is concrete.



Figure 17. South and west façade of the A/B Wing (Baby Hospital), four-photograph montage.
Source: Page & Turnbull, 2013.

The south façade of the A/B Wing (Baby Hospital)’s east-west ell served as the primary façade of the Hospital from 1926 until 1982 and faces onto a courtyard and circular driveway. The primary entrance is located at the center of the south façade, at the ground floor of a two-story brick addition that was constructed in 1962. The primary entrance is a pair of fully-glazed aluminum sliding doors flanked by fixed, plate-glass, aluminum-sash windows; the entrance is accessed by a short flight of concrete steps and overhung by a flat, projecting canopy (**Figure 18**). Fixed and awning aluminum-sash ribbon windows, defined by a continuous inset brick lintel, span the second story of the addition. A circle-and-sheaf frieze spans the width of the addition and continues onto the older portions of the building. A Bambino emblem is located within the frieze above where the primary entrance is located; the Bambino is often used as a symbol for pediatrics and is based on a sculpture by Italian Renaissance artist Andrea della Robbia.

To the east of the addition, near the interior angle of the L-shaped plan, is a two-story, five-sided solarium bay window with multi-light, steel-sash windows (**Figure 19**). The windows are separated by fluted columns with capitals that feature acanthus leaves, urns, fleur-de-lis, cherub’s heads, and griffins. Each story is surmounted by a molded frieze depicting animal and bird motifs and topped by a simple metal cornice. The basement level to the east of the five-sided bay features multi-lite steel sash windows, some with metal grilles, which look out into a concrete light well enclosed a metal

railing. At the third story level of the south façade of the east-west ell are windows of the primary type (paired two-over-two, double-hung, wood-sash windows with multi-light awning transoms and brick lintels). One window at the first floor is infilled with brick. The façade terminates in a simple cornice below the slightly overhanging eaves of the gable roof.



Figure 18. South facade, detail of 1962 addition and primary entrance, showing Bambino frieze detail.
Source: Page & Turnbull, 2008.



Figure 19. South facade, showing two-story bay window.
Source: Page & Turnbull, 2013.

The west façade of the A/B Wing (Baby Hospital) faces onto the courtyard and is divided into nine structural bays (**Figure 20**). An exposed basement level is visible at the south end of the facade and contains multi-lite industrial steel sash windows with textured wire glass. The below-grade light well features concrete walls, metal access stairs, and a metal railing. At the first story, the third northernmost bay features a fully-glazed aluminum door surmounted by a metal awning. Two metal awnings also cover windows north of the entrance. A concrete terrace with a brick wall is located beneath the balcony. A flight of concrete steps provides access from the terrace down to the basement. A concrete staircase that spans the fourth and fifth bays leads to a terracotta-clad balcony at the second story level (**Figure 21**). The four bays associated with the terrace contain entrances with paired, partially-glazed wood doors, multi-light glazed transoms, and multi-light sidelights. Some window transoms have been replaced by air-conditioning window units.

At the second story level, the balcony stretches across the sixth, seventh, and eighth bays above a terrace. It is supported by four sets of large, paired ornamental terracotta brackets with floral and acanthus leaf motifs. These brackets continue as paired pilasters dividing the paneled balcony railing. Access to the balcony is provided by paired, partially-glazed wood doors surrounded by multi-light glazed transoms and sidelights that are located in the eighth structural bay. One window immediately north of the second story entrance has been replaced with a flush wood door and brick infill. All other bays on the second story feature paired, two-over-two aluminum frame windows surmounted by two-light transoms. The west façade terminates in a flat roofline adorned with the terracotta frieze described earlier.



Figure 20. West facade of the A/B Wing. Source: Page & Turnbull, 2013.

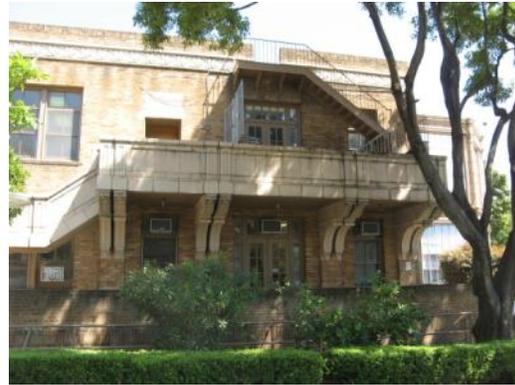


Figure 21. West facade of the A/B Wing, detail of second story balcony. Source: Page & Turnbull, 2013.

The narrow southern façade of the north-south portion of the ell includes a two-story, five-sided bay window with multi-light, steel-sash windows (**Figure 22**). The windows are separated by fluted columns with capitals that feature acanthus leaves, urns, fleur-de-lis, cherub’s heads, and griffins. Each story is surmounted by a molded frieze depicting animal and bird motifs and topped by a simple metal cornice.



Figure 22. Southern facade of the north-south portion of the ell of the A/B Wing. Source: Page & Turnbull, 2013.

The east façade of the A/B Wing (Baby Hospital) faces a driveway and surface parking lot that was formerly Dover Street. The façade is divided into twelve structural bays (**Figure 23**). Entrances at this façade are located at the exposed basement story, which is accessed via a concrete stair and includes several glazed wood entry doors and multi-lite steel sash industrial windows, all blinded by opaque paint or metal panels (**Figure 24**). The first and second stories are fenestrated with windows of the primary type. As on the west façade, some transoms have been replaced by air-conditioning window units. A granite plaque reading “The Baby Hospital 1927” is located on the wall at the south end of the façade.



Figure 23. East facade of the A/B Wing. Source: Page & Turnbull, 2013.



Figure 24. East facade of the A/B Wing, exposed basement story. Source: Page & Turnbull, 2013.

The north façade of the A/B Wing (Baby Hospital) faces an access driveway and the Cardiac Catheterization Lab and the Ford Diagnostic and Treatment Center (**Figure 25**). The façade is three stories over an exposed basement. The basement level includes several multi-lite steel sash window groups. A concrete stair leads to a glazed inset aluminum door at the first story. Fenestration at the first and second stories is of the primary type, while fenestration at the third story is single-lite fixed over awning with steel sash at the east, and alternating primary type and multi-lite steel sash at the west. Three windows are infilled with brick at the west end of the first story. The façade terminates with a simple flush cornice at the east and a molded metal cornice at the west.



Figure 25. North facade of the A/B Wing. Source: Page & Turnbull, 2013.

A/B Wing (Baby Hospital) Interior

The A/B Wing (Baby Hospital) has an L-shaped plan that accommodates double-loaded corridors at the first and second stories, which terminate in formerly open-plan solarium rooms (now divided into office spaces) at the south end of its north-south axis (**Figure 26**). Open-plan solariums are also located on the east-west axis at the first and second stories, currently used as a board room and a doctor’s lounge, respectively. As is typical of hospitals, the configuration of interior spaces has been altered to change uses and accommodate equipment. Remodeled rooms are typically furnished with dropped acoustical tile ceilings, box fluorescent lighting, and pre-fabricated carpet tiles. Overall, the offices on the second story are less altered than those on the first story and contain gypsum board-clad walls with raised wiring strips and light switches. Notable features that remain in the A/B Wing (Baby Hospital) include a tile-clad operating room on the second story that features built-in metal cabinetry which is now used as a storage closet, push-button nurse call buttons that are located in the upper portion of the walls in some offices, and wood railings in the stairwells at the east-west axis of the building (**Figure 27**).



Figure 26. Interior of the A/B Wing, typical office.
Source: Page & Turnbull, 2013.



Figure 27. Interior of the A/B Wing, original stair railings. Source: Page & Turnbull, 2013.

C. B/C WING (1946, ADDITIONS 1958 AND 1987)

In 1946, architects Douglas D. Stone and Louis B. Mulloy designed the B/C Wing, an L-shaped, two-story over exposed basement addition that was added to the west side of the existing A/B Wing. This building was constructed to replace the McElrath mansion, which was located at this site and originally housed the Baby Hospital. The mature magnolia which was planted in 1860 was preserved in the demolition of the McElrath mansion and the construction of the B/C Wing. The B/C Wing closely mirrors the plan of the A/B Wing (Baby Hospital) and matches its exterior brick color, and when constructed roughly doubled the size of the facility. The B/C Wing abuts the west end of the east-west axis of the A/B Wing (Baby Hospital), creating a U-shaped complex that surrounds the courtyard and circular drive (**Figure 28**). The two buildings have independent structural systems.



Figure 28. South and east façade of the B/C Wing, three-photograph montage. Source: Page & Turnbull, 2013.

The south façade of east-west axis of the B/C Wing features an exposed basement with multi-lite industrial steel sash windows and large metal doors. The facade is dominated by a two-story over exposed basement, five-sided, angled bay window similar to those at the A/B Wing (Baby Hospital). The basement level features metal vents. The upper two stories feature multi-light, steel-sash windows surrounded by composite colonettes and friezes. It is capped by a flat roof. The west portion of the south façade is fenestrated primarily with three-part aluminum sash windows, which are the primary window type on this wing. The south façade of the B/C Wing terminates in a flat roofline adorned with the terra-cotta frieze that is also found on the A/B Wing (Baby Hospital). In 1958, a third story was added to the east-west axis of the B/C Wing. This addition features fixed and awning aluminum-sash windows.

The exposed basement level of the east façade of the B/C Wing features multi-lite steel sash windows, some of which are infilled with metal plates or air conditioning units. The light well features a concrete retaining wall and metal railings. The first story of the east façade includes a brick porch mirroring that at the A/B Wing; this brick porch was enclosed in 1987 by a one story addition, which includes four-light, aluminum-sash ribbon windows with operable awning portions (**Figure 29**). Metal downspouts are attached to projecting triangular rain catchments. The roofline of the addition features sheet metal coping. The second story of the east facade is fenestrated with three-part aluminum sash windows and terminates in the terracotta frieze described earlier. At the south end of north-south ell of the B/C Wing, a two-story squared bay clad in scored concrete includes three-part steel-sash windows with fixed and awning portions at both stories (**Figure 30**). Two partially-glazed wood doors with glazed transoms are located on the west side of the bay at the first and second story levels. The second-story entrance is accessed by a metal exterior staircase.



Figure 29. Detail of east facade of B/C Wing, showing first story addition. Source: Page & Turnbull, 2013.



Figure 30. Detail of south part of B/C Wing showing addition. Source: Page & Turnbull, 2013.

The magnolia tree located directly east of the east façade of the B/C Wing was planted in 1860 by women of the Alden family. Solomon Alden was the original landowner of the site, and in 1875 his daughter Elsie married John McElrath. The McElraths constructed the Victorian mansion that bore their name and housed the Baby Hospital at its founding in 1912 (**Figure 31**). The tree was preserved in the demolition of the first house on the property, an Italianate house which belonged to Solomon Alden. It was preserved again when the McElrath mansion was constructed, and again when it was demolished in advance of the construction of the B/C Wing.



Figure 31. Magnolia tree located east of the east facade of the B/C Wing, planted 1860 by women of the McElrath family. Source: Page & Turnbull, 2013.

The west façade of the B/C Wing is abutted at the north end of the first story by the Central Plant/West Site Plant; one 12-lite aluminum fixed and awning window group is visible at the southern portion (**Figure 32**). At the second story, two 12-lite aluminum fixed and awning window groups are located at the south, and several smaller aluminum-sash windows are visible above the Central Plant. The west façade terminates with a flush roofline.

The north façade of the B/C Wing abuts the Patient Tower completely and has no visible façade.



**Figure 32. West façade of the B/C Wing.
Source: Page & Turnbull, 2013.**

D. BRUCE LYON MEMORIAL RESEARCH CENTER (1958, ADDITION 1972)

In 1958, the firm Stone, Marraccini and Patterson designed the Bruce Lyon Memorial Research Center (“Research Center”), located south of the courtyard between the A/B Wing and the B/C Wing and now south of the helistop (**Figure 33**). The Research Center was designed and built as a one-story International style building with stack-bond brick cladding and a flat roof. In 1972, a second story addition was added to the Research Center, which is clad in stucco and capped with a flat roof. The second story addition is supported by concrete posts, rests on top of the original building, and projects in volume at all facades beyond the footprint of the original building. The building’s original primary entrance is set in an enclosed glazed portico located on the west side of the building. This entrance is no longer in use, and the contemporary primary entrance is located on the east façade at the northeast corner of the building (**Figure 34**).



Figure 33. Research Center, north and west façades, original primary entrance visible at right. Source. Page & Turnbull, 2008.



Figure 34. Research Center, detail of primary entrance at east facade. Source: Page & Turnbull, 2013.

The east façade, which faces several portable structures and an embankment to the Grove Shafter freeway beyond, is loosely organized into four bays. The primary entrance is a flush metal door located at the first story of the northernmost bay. At both stories this bay is clad in stucco and projects in mass from the main volume of the building; at the second story there are two two-lite fixed aluminum sash windows. The center two bays are clad in stack-bond brick at the first story and stucco at the second story; the first story is largely obscured by utility sheds and portable structures. The second story rests on two concrete piers and projects in mass several feet beyond the mass of the first story. It has four fixed aluminum-sash windows at the center two bays. The southern bay projects in mass from the main volume of the building, is clad in stucco at both stories, and has fixed aluminum-sash windows at both stories.

The north façade faces the helistop and a portable structure. The eastern part of the north façade is clad in stucco at both stories and has no windows or doors. The remainder of the first story includes a continuous band of fixed and awning steel-sash ribbon windows with metal spandrel panels above and below. A metal cornice runs the width of the first story, above which the second story addition projects approximately four feet beyond the mass of the first story. The second story is supported by

a concrete post at the west and is clad in scored stucco. The second story has two groups of eight fixed aluminum sash windows and terminates with a projecting band of stucco and a flush roof.

The west façade faces Martin Luther King Jr. Way and the elevated BART tracks. The first story features a projecting mass at the north, which includes fixed and awning metal-sash ribbon windows with metal spandrel panels above and below at the north and south facades, and stack bond brick cladding at the west façade (**Figure 35**). There is a glass vestibule with a deep overhanging flat roof at center, which is no longer in use and is fronted by a decorative cinderblock wall. The remainder of the first story of the west façade includes fixed and awning metal-sash ribbon windows with metal spandrel panels above and below. The second story of the west façade is supported by concrete posts and clad in scored stucco (**Figure 36**). It includes ten two-part fixed aluminum sash windows, above which the story terminates with a projecting band of stucco and a flush roof.



Figure 35. Research Center, west facade, detail of former primary entry vestibule. Source: Page & Turnbull, 2013.



Figure 36. Research Center, west facade. Source: Page & Turnbull, 2013.

The south façade of the Research Center faces the Research Center Addition (**Figure 37**). The first story is clad in stack bond brick and has no windows and one metal door. The first story projects beyond the second story, which is clad in score stucco and includes two groups of eight fixed aluminum sash windows. At the center of the second story there is a passageway to the Research Center Addition, which is clad in stucco. The south facade terminates with a projecting band of stucco, at which there is an affixed metal sign for the hospital, and a flush roof.



Figure 37. Research Center, south facade (partial).
Source: Page & Turnbull, 2013.

E. FORD DIAGNOSTIC AND TREATMENT CENTER (1962, ADDITION 1974)

In 1962, the firm Stone, Marraccini and Patterson designed the Ford Diagnostic and Treatment Center (“the Center”) located north of the A/B Wing (Baby Hospital) at the southwest corner of 52nd and Dover streets (**Figure 38**). The reinforced concrete building is roughly square in plan. It is connected to the A/B Wing by a small hyphen projecting from the south façade. The west façade of the Center abuts the east façade of the Patient Tower. The original design of this building was two stories in height; a third story was added in 1974. The building is clad in smooth stucco and capped with a flat roof. All windows are metal sash.



Figure 38. Ford Diagnostic and Treatment Center, 1964, addition 1974. Source: Page & Turnbull, April 2013.



Figure 39. Ford Diagnostic and Treatment Center, primary (east) facade and entrance detail. Source: Page & Turnbull, April 2013.

The primary facade faces east and consists of three structural bays. The primary entrance is located in the southernmost bay and includes paired, fully-glazed metal doors, set within a double-height eleven-pane window wall (**Figure 39**). The central and northern bays both have five awning windows at the (below grade) first story, and five fixed over awning windows at the second story. All three bays have areas of painted metal spandrel panels above and below the windows. The third story

of the building (1974 addition) is stepped back from the primary façade and includes a series of tinted atrium-style windows, with an enclosed area at the south.

The north façade faces 52nd Street and is organized into seven bays (**Figure 40**). The easternmost bay is two stories in height due to the third story setback, and the remainder of the bays are three stories in height. The westernmost bay is clad with brick at all three stories, and includes the Pedestrian Bridge to the Outpatient Clinic at the third story. At all other bays, the first story (below grade) has five awning windows, and the second story has five fixed over awning windows. At the third story, the second bay is clad in stucco, while the remaining bays five fixed over awning windows. All bays have areas of painted metal spandrel panels above and below the windows, and the façade terminates flush, with a metal safety railing above.

The west façade fully abuts the Patient Tower to the east. The south façade is visible from the vantage of a supply driveway between the Center and the A/B Wing (Baby Hospital) (**Figure 41**). The south façade includes three bays, which are blinded at the first and second stories and have contemporary 15-lite fixed windows at the third story.



Figure 40. Ford Diagnostic and Research Center, north facade. Source: Page & Turnbull, 2013.



Figure 41. Ford Diagnostic and Research Center, south facade. Source: Page & Turnbull, 2013.

F. CENTRAL PLANT/WEST SITE PLANT (1979, ADDITION 1987)

In 1979, the one-story Central Plant/West Site Plant was constructed abutting the west side of the B/C Wing (**Figure 42**). A second floor was added to the Plant in 1987. The Plant is clad in concrete panels and features small awning aluminum-sash windows on the second story.



Figure 42. Central Plant (at left) and the west facade of the B/C Wing.
Source: Page & Turnbull, 2008.

G. PATIENT TOWER (1982)

In 1982, the five-story Patient Tower was constructed north of the B/C Wing and west of the Ford Diagnostic and Treatment Center. The concrete-panel-clad Patient Tower now serves as the hub of the hospital complex and as the main entrance to the hospital complex. A circular drive at the site’s northwest corner provides access to the main entrance on the northwest façade and the emergency entrance on the west façade (Figure 43). The main entrance is set in a two-story fully-glazed entry lobby and features fully-glazed aluminum sliding doors with glazed transoms and sidelights. The north and northwest façades of the Patient Tower feature large and small fixed aluminum-sash ribbon windows (Figure 44).



Figure 43. Patient Tower, primary (northwest) facade, showing main entrance and emergency service entrance. Source: Page & Turnbull, 2013.



Figure 44. Patient Tower, north facade. Source: Page & Turnbull, 2013.

H. CAFETERIA (1987)

In 1987, a one-story Cafeteria was constructed, located in the space south of the Patient Tower, north of the West Site Plant/Central Plant building, and east of the B/C Wing. It is clad in smooth

stucco and features a wall of fixed aluminum-sash windows at the west façade (**Figure 45**). A stained glass oculus references the bambino above the entrance of the A/B Wing (Baby Hospital) (**Figure 46**). The Cafeteria is accessed from within other Hospital areas and has no primary street-level entrance; the entrances are associated with emergency services and utilities.



Figure 45. Cafeteria, west facade. Source: Page & Turnbull, 2013.



Figure 46. Cafeteria Oculus with bambino, west facade. Source: Page & Turnbull, 2013.

I. THE BRUCE LYON MEMORIAL RESEARCH CENTER ADDITION (1992)

The Bruce Lyon Memorial Research Center Addition was constructed in 1992 on the south side of the Research Center (**Figure 47**). The three-story Addition is clad in bands of textured and colored stucco with horizontal scoring. The building features fixed, square, aluminum-frame windows and a stepped parapet with two crenellations. The primary entrance is located at the east façade and consists of an aluminum-frame door and window system with a fully glazed door (**Figure 48**).



Figure 47. Research Center Addition, southwest facade. Source: Page & Turnbull, 2013.



Figure 48. Research Center Addition, east facade with primary entrance. Source: Page & Turnbull, 2013.

J. OUTPATIENT CENTER (1993)

The Outpatient Center is a five-story steel-frame and concrete building located north of 52nd Street (**Figure 49**). The primary entrance is located on the north end of the west façade. The building is clad in stucco, capped by a flat roof, and features fixed and sliding aluminum-sash windows and glass block windows. Plastered columns visually mark the first through third stories. A three-story attached atrium at the east portion of the north façade includes glazed walls and a barrel roof. A pedestrian bridge at the third-floor level connects the Outpatient Center to the Patient Tower (**Figure 50**).



Figure 49. Outpatient Center, west and south facades.
Source: Page & Turnbull, 2013.



Figure 50. Pedestrian Bridge between the Patient Tower (left) and the Outpatient Center (right). Source: Page & Turnbull, 2013.

K. PARKING GARAGE (1993)

A five-level parking garage is located northwest of the Outpatient Center (**Figure 51**). It is clad in concrete panels and is set back from the street at the north and south facades (**Figure 52**).



Figure 51. Parking Garage, west facade. Source: Page & Turnbull, 2013.



Figure 52. Parking Garage, south facade. Source: Page & Turnbull, 2008.

L. CARDIAC CATHETERIZATION LAB (1993)

In 1993, a one-story, flat-roofed Cardiac Catheterization Lab was constructed at the southeast corner of the Diagnostic and Treatment Center. The Lab is clad in concrete panels with areas of decorative

ceramic tile, and has no windows (**Figure 53**). The building is accessed via a concrete stair located to the north, between the Catheterization Lab and the Ford Diagnostic and Treatment Center. The stair leads to a metal door and an egress tower which also includes a second-story stair and entrance.



Figure 53. Cardiac Catheterization Lab, south and east facades.
Source: Page & Turnbull, 2013.

M. HELISTOP (2000)

The three-level helistop is located between the B/C Wing and the Bruce Lyon Research Center (**Figure 54**). It is constructed of metal and is attached to a four-story elevator shaft.



Figure 54. Helistop, view looking south.
Source: Page & Turnbull, June 2008.

N. PORTABLE BUILDINGS (VARIOUS DATES)

Eight portable buildings are located on the hospital site: two to the east of the A/B Wing (Baby Hospital), three south of the B/C Wing, and three east of the Bruce Lyon Memorial Research Center (**Figure 55**). These buildings range in size. They generally have flat roofs and are clad in vertical wood siding, with sliding aluminum-sash windows.



**Figure 55. Typical portable building, east of the Bruce Lyon Memorial Research Center.
Source: Page & Turnbull, June 2008**

VI. EVALUATION OF CHILDREN’S HOSPITAL BUILDINGS FOR CALIFORNIA REGISTER ELIGIBILITY

The following section evaluates the buildings on the Children’s Hospital study site that are more than 45 years old for eligibility for listing in the California Register of Historical Resources. It also includes an evaluation of the Children’s Hospital complex as a potential historic district.

A. A/B WING (BABY HOSPITAL) EVALUATION

This section evaluates the A/B Wing (Baby Hospital) for its eligibility for listing in the California Register of Historical Resources, including application of criteria of significance and evaluation of integrity (see pages 4-5 for evaluative criteria).

Criterion 1 (Events)

The A/B Wing (Baby Hospital) appears significant under California Register Criterion 1 as a building that reflects “events that have made a significant contribution to the broad patterns of local or regional history, or the cultural heritage of California or the United States.” Organized in 1912 and dedicated in 1914, the Baby Hospital was the first medical facility in the East Bay to provide services specifically for young children, during a time when death rates for children under two stood at over ten percent. The Hospital’s Clinic offered pre-natal, child-rearing classes, and wellness workshops which served nearly 7,000 young patients in its first year of operation. The mission of the Baby Hospital, which was said to be the first and only of its kind in the state of California, was to care for sick babies regardless of creed, nationality, or race. In an era before health insurance, medical care at the Baby Hospital was provided regardless of ability to pay for services; in 1922, 58% of visits were free and 30% were partially paid. As early as the 1920s, the hospital also operated as a teaching facility, training pediatricians. The Hospital was a thriving institution in the 1920s, when in spite of budget shortfalls it was able to fund and oversee the construction of a modern purpose-built hospital building, the extant A/B Wing, which was completed in 1926. As the earliest purpose-built hospital for children in the East Bay, the A/B Wing (Baby Hospital) is significant for its unique role in providing medical care and services to children and as a teaching hospital. The period of significance for the hospital under this criterion is 1912-1926, which extends from the founding of the hospital to the year that the A/B Wing (Baby Hospital) was completed; thus, the period of significance for the A/B Wing (Baby Hospital) is essentially the year of its construction.

Criterion 2 (Persons)

The A/B Wing (Baby Hospital) does not appear to be eligible for the California Register under Criterion 2. Although prominent persons have been associated with the Baby Hospital over time, research has failed to reveal a significant association that would justify inclusion of the A/B Wing (Baby Hospital) in the California Register under this criterion.

Criterion 3 (Architecture)

The A/B Wing (Baby Hospital) appears significant under California Register Criterion 3 as a building that “embodies the distinctive characteristics of a type, period, region, or method of construction, or represents the work of a master, or possesses high artistic values.”

As a representative of a “type and period,” the A/B Wing (Baby Hospital) is an early purpose-built hospital and embodies early 20th century hospital design trends. The building is narrow and linear in form and is clad in brick and terracotta to fireproof the structure and prevent the spread of contagious disease. Oriented to the south to maximize its exposure to sunlight, the building includes solariums and windows to ensure light and airflow. The original floor plan also contained a large open-plan ward to allow nurses to maintain surveillance of the maximum number of patients at one time.

Additionally, the A/B Wing (Baby Hospital) possesses high artistic values. Designed by architect Edward W. Cannon in a Northern Italian Renaissance style, the building’s architectural detail is rich and includes fluted columns with capitals that feature acanthus leaves, urns, fleur-de-lis, cherub’s heads, and griffins, molded frieze depicting animal and bird motifs, bambino medallion, and a terra cotta balcony supported by ornamented brackets with floral and acanthus-leaf motifs. The building displays a high level of façade detail in the brickwork and the window configuration, which have multi-lite transom windows and brick lintels.

Architect Edward W. Cannon was active in Oakland and the greater California Bay Area between 1911 and 1940. He practiced in the firm of C. W. Dickey during his early career and practiced independently afterwards. He designed the six-story addition to Kahn’s Department Store at Broadway and 12th Street in Oakland, which is listed in the National Register. He also designed a handful of residences, apartment buildings, and one light industrial building in Oakland, a former furniture factory located at 221 Oak Street, which has received Oakland Heritage Property Designation. Although the A/B Wing (Baby Hospital) is a fine example of his work, Cannon’s contributions to the built environment do not raise him to the level of master architect.

Nevertheless, the A/B Wing (Baby Hospital) is significant under Criterion 3 because it “embodies the distinctive characteristics of a type and period” and it does “possess high artistic values.” The period of significance under this criterion is 1926, the year the building was constructed.

Criterion 4 (Information Potential)

The A/B Wing (Baby Hospital) was not evaluated for eligibility under Criterion 4, which is beyond the scope of this report. The “potential to yield information important to the prehistory or history of California” typically relates to archeological resources, rather than built resources. When Criterion 4 does relate to built resources, it is for cases when the building itself is the principal source of important construction-related information. Based on historic research, Criterion 4 is not applicable to the A/B Wing (Baby Hospital).

A/B Wing (Baby Hospital) Integrity

In addition to being determined eligible under at least one of the four California Register criteria, properties must also retain sufficient historical integrity in order to be deemed significant. The following section evaluates the integrity of the A/B Wing (Baby Hospital).

The A/B Wing (Baby Hospital) maintains integrity of location, workmanship, and association; a moderate degree of integrity of design and materials; and no longer retains integrity of setting or feeling from its period of significance (1926). Due to compromised integrity, the building does not qualify for listing in the California Register. A detailed evaluation of the A/B Wing (Baby Hospital)'s integrity according to each aspect follows.

Location

The location of the A/B Wing (Baby Hospital) has not changed. The hospital complex has expanded into the surrounding Temescal neighborhood, and the McElrath mansion that originally housed the Baby Hospital is no longer extant; however, the purpose-built A/B Wing (Baby Hospital) remains in its original location and has not been relocated.

Setting

Originally, the A/B Wing (Baby Hospital) was located at the center of a residential block and faced south onto 51st Street (no longer extant). A driveway from 52nd Street led to an ambulance entry at the building's northeast corner and the main entry was located to the west side of the building's south façade. This entrance was remodeled and continued to serve as the complex's primary entrance until the five-story Patient Tower was constructed northwest of the original Baby Hospital wing. The Patient Tower has an angled entrance, facing northwest onto Martin Luther King Jr. Way and 52nd Street, which supplanted the entrance on the A/B Wing (Baby Hospital) as the primary entrance. Several other additions to the complex, including the Patient Tower, have obscured the Baby Hospital and have separated it from 52nd Street, the road which replaced 51st Street as the main access route to the hospital. From 52nd Street, only portions of the east facade of the Baby Hospital may be seen from the public right of way (Dover Street being closed to public access along the east side of the hospital property). The relocation of the primary entrance has altered the way in which the building is approached, changed the courtyard from a private, secluded space into a public traffic path, and significantly changed the visibility and understanding of the Baby Hospital wing, which now reads as a secondary structure at the rear of the hospital complex.

When constructed in 1926, the A/B Wing (Baby Hospital) building was physically connected to the McElrath mansion, the oldest dwelling in Temescal and the building that had served as the first Baby Hospital. Despite being an institutional building constructed of steel, concrete, and brick, the two-story Baby Hospital building maintained a size and scale in keeping with the surrounding neighborhood, which consisted primarily of small, wood frame bungalows and cottages that were one to two stories tall.

The McElrath mansion was removed in 1946 and the present B/C Wing was constructed to the west of and directly adjacent to the Baby Hospital as part of architect Douglas Stone's plan to expand the

hospital as part of a comprehensive master plan. However, only the B/C Wing was constructed per the master plan and even this Wing, though similar, was not constructed exactly as proposed. The addition to the A/B Wing (Baby Hospital) nearly doubled the size of the hospital and changed its form from an L- to a U-shaped plan. Because the form of the B/C Wing mirrored that of the original A/B Wing (Baby Hospital), the original form of the Baby Hospital is no longer distinguishable. Instead, the original building and B/C Wing read as a single structure, though they have independent structural systems. The addition of the two-story, box-like Diagnostic and Treatment Center and the remodeling of the Baby Hospital’s main entry contributed to the overall reconfiguring of the complex and differed from the massing of the Baby Hospital wing, which had a linear and narrow form.

Later additions to the complex further altered its overall massing and size. A third story added to the Diagnostic and Treatment Center and the construction of the five-story Patient Tower served to overshadow the lower profile A/B Wing (Baby Hospital). The construction of a Cardiac Catheterization Lab adjacent to the north façade of the Baby Hospital wing further hid the original building and altered its form. The addition of the helistop and other structures directly south of the A/B Wing (Baby Hospital) overshadow the lower profile A/B Wing.

Furthermore, the setting of the residential neighborhood surrounding the hospital has changed over time. Not only were residences to the south and north of the hospital removed to make way for hospital expansion during the 1950s, the Grove Shafter Freeway (State Route 24) was constructed immediately to the east in 1968, and an off-ramp to Grove (now Martin Luther King Jr. Way) was placed immediately south of the Research Center. Grove was widened in the 1960s, as well, and an elevated BART track was installed circa 1968.

The extensiveness of the alterations to the complex’s overall form—the cumulative impact of the size, massing, form, and location of the additions—have compromised the A/B Wing (Baby Hospital)’s integrity of setting. Additionally, the hospital complex no longer retains a strong relationship to its residential neighborhood setting, which has also been greatly altered in the immediate area.

Design

When evaluated independently of its additions, the A/B Wing (Baby Hospital) retains a moderate degree of integrity of design as a hospital building from the 1920s. Most notably, the characteristics that are most intact include the narrow linear form, solariums, and double-loaded corridor and staircases. The building’s Northern Italian Renaissance style is also intact, with details that include engaged columns and molded friezes at the solariums and a balcony and stair on the west façade that features paired pilasters and oversized supporting brackets. The exterior does feature some alterations that detract from the building’s integrity of design. These include a circa 1948 third story addition at the east end of the south façade and a circa 1962 flat-roofed third-story addition at the northeast corner of the building. The arched entrance was replaced in 1962 with a new two-story projecting entrance that includes modern ribbon windows and a glass curtain wall storefront system at the ground floor. This entrance altered the spatial relationships of the original design, such as the emphasis on the projecting solarium. Other minor alterations that detract from the original design

include metal awnings over some windows; contemporary walkways, ramps, and metal railings to approach the building; and metal security gates at the first floor patio and second floor balcony.

On the interior, the solariums now contain the hospital's board room and administrative offices. The original interior detailing of the hospital board room was stripped to modernize the interior and the solarium containing offices was filled with office cubicles. The ward, which also initially incorporated an open-plan design, was subdivided into offices by gypsum-board partition walls. Although the double-loaded corridor and staircases have been modernized and brought up to code, the A/B Wing (Baby Hospital) retains its overall interior circulation pattern. It is typical for alterations to be made to the interior of buildings such as hospitals in order to accommodate technological advances and modernization; therefore, the general form and organization of the interior is more important than its materiality.

In sum, the A/B Wing (Baby Hospital) retains a moderate level of integrity of design because it has been compromised in the above-mentioned ways. The large additions to the A/B Wing (Baby Hospital) are addressed under integrity of setting.

Materials

The exterior materiality of the A/B Wing (Baby Hospital) remains largely intact. The brick cladding and terra cotta ornamentation, including the balcony, as well as the original fenestration pattern and windows for most of the wing are extant. Both the brick and terra cotta are significant building materials because they were used in the early 20th century to fireproof buildings and deter the spread of infectious diseases such as tuberculosis. The biggest losses of original material have come with the various additions. For example, the addition of the new two-story entrance on the south façade in 1962 removed the arcaded entry portico, as well as the brick wall and five windows on the second floor. Some original material was also likely lost with the circa 1948 and circa 1962 additions to the northeast corner of the third floor, the 1948 addition of the B/C Wing, and the connection to the Ford Diagnostic and Treatment Center in 1962. In addition, there is one window opening on the second story of the west façade that was replaced with a flush wood door and brick infill, one infilled window at the first story of the east façade, three infilled windows on the north façade, a replacement door on the north façade, and numerous air conditioning units that have replaced panes of glass in the windows. The original clay tiles on the roof have been replaced with composite roofing.

On the interior, few original finishes remain. Drywall partitions have been erected throughout, as well as carpet tiles and drop ceilings with fluorescent lights.

In sum, the material integrity of the A/B Wing (Baby Hospital) remains in part on the exterior, but has been compromised on the interior. On the whole, the A/B Wing retains a moderate level of integrity of materials.

Workmanship

The A/B Wing (Baby Hospital) exhibits a high level of exterior decorative detail, which includes an Italian Bambino emblem. The figure appears as a medallion on the building's frieze. This detail, which was incorporated into the building's design to reflect the hospital's pediatric specialization, is

representative both of the hospital's purpose and of the building's high level of craft. The building also displays workmanship in its fluted engaged columns at the solariums which display capitals with acanthus leaves, urns, fleur-de-lis, bambino heads, and griffins; molded, friezes depicting animal and bird motifs; and a terracotta circle-and-sheaf frieze below the second story roofline. Since these decorative details remain intact, the A/B Wing (Baby Hospital) retains integrity of workmanship.

Feeling

The A/B Wing (Baby Hospital)'s integrity of feeling has significantly changed because the building is no longer accessible to the general public. Only portions of its east façade are visible from public streets and the freeway. The building has been incorporated into a larger complex of structures. The wing is visible from the courtyard to the south of the building, but the massing and size of the numerous additions on its north and west sides, and the number of free-standing buildings and structures that have been added to the complex as a whole, have altered the feeling of the original scale of the hospital, which was comparable to the surrounding residential neighborhood. The hospital's transformation from a local hospital for children and teaching facility into a national research center in the 1950s and 1960s contributed to the loss of integrity of feeling of the A/B Wing (Baby Hospital). Ultimately, the building is able to convey a moderate level of integrity of feeling related to its aesthetic expression since the original design, materials, and workmanship remain in part and can convey the period of its construction. However, the historic sense of the primacy of this building has been compromised due to the numerous additions, shift in location of the public entrance, and other changes in setting. Overall, the building no longer retains integrity of feeling.

Association

The A/B Wing (Baby Hospital) has continuously operated as a hospital for children since its construction in 1926 and therefore retains its historic association.

Conclusion

In conclusion, the A/B Wing (Baby Hospital) is not eligible for individual listing in the California Register of Historical Resources.

B. B/C WING EVALUATION

The following section evaluates the B/C Wing for its eligibility for listing in the California Register of Historical Resources, including application of criteria of significance and evaluation of integrity (see pages 4-5 for evaluative criteria).

Criterion 1 (Events)

The B/C Wing does not appear to be individually significant under Criterion 1 of the California Register. Unlike the A/B Wing (Baby Hospital) of the Children’s Hospital, which is significant as one of the first purpose-built hospitals for children in the East Bay during a period of significance from 1912-1926, the B/C Wing addition lacks the same distinction. By the time the B/C Wing was constructed, other hospitals had been established in Oakland, including Highland County Hospital, and in the vicinity. The B/C Wing is physically an integral piece of the hospital complex; however, the B/C Wing is not individually significant in association with any one or pattern of “events that have made a significant contribution to the broad patterns of local or regional history, or the cultural heritage of California or the United States.” The magnolia tree that is located directly east of the east façade of the B/C Wing can be similarly described: while the tree is an integral part of the hospital complex, planted by the original landowners and preserved through multiple building iterations at the lot, the tree is not significant for its association with any one or pattern of events. Although it has become associated with the Hospital, serving as inspiration for the Hospital’s fundraising organization’s name (“The Branches”), it was planted before the site was associated with the Hospital.

The B/C Wing was built during the post-war era in response to the war-time population explosion and the subsequent “baby boom.” As with most cities in the region, there was a pressing need for expansion of institutions such as hospitals, schools, libraries, and other community services, as well as residential building stock and infrastructure. The B/C Wing was constructed to respond to the demand for more space and replaced the McElrath mansion, the Victorian-era home that initially housed the Children’s Hospital. Though the B/C Wing was constructed to support the A/B Wing (Baby Hospital), it is not independently significant.

Criterion 2 (Persons)

The B/C Wing does not appear to be eligible for the California Register under Criterion 2. Research has failed to reveal a significant association with any individuals that would justify inclusion of the B/C Wing in the California Register under this criterion.

Criterion 3 (Architecture)

The B/C Wing does not appear to be eligible for the California Register under Criterion 3. Constructed in 1946 as an addition to the A/B Wing (Baby Hospital), the B/C Wing replaced the McElrath mansion, which housed the original Baby Hospital. The Wing was constructed to fulfill Stone and Mulloy’s Master Plan, which depicted the expansion of the Hospital with the addition of three- and four-story wings. Although the B/C Wing is typical of the additions made to institutions such as hospitals, and continued elements of the design vocabulary and materiality of the A/B Wing (Baby Hospital), which embodies early 20th century hospital trends, the Wing is not a strong example of a “type, period, or method of construction” on its own. The B/C Wing was constructed in the

mid-20th century, when the design of hospitals was in transition from low, linear forms with maximum sun exposure and open-plan patient wards to larger block forms with fewer but larger windows and private rooms. The plan is very similar to that of the A/B Wing (Baby Hospital), with a matching solarium to the west of the entrance and double-loaded corridors. Mirroring the A/B Wing (Baby Hospital), the B/C Wing originally contained offices, laboratories, and storerooms on the first floor and a patient ward on the second floor. On the exterior, the solarium features matching ornament, though it is capped with a flat roof, and the addition continues the terracotta circle-and-sheaf frieze below the second story roofline. However, on the whole, the exterior of the B/C Wing takes on a stripped modern style and is less ornamented than the A/B Wing (Baby Hospital). It also has a smaller solid-to-void ratio because it incorporates ribbons of large steel frame windows that are reminiscent of the European International Style of the earlier 20th century. On balance, the form and layout of the new wing reinterpreted the design of the A/B Wing (Baby Hospital) in a more modern way than it demonstrated advances in medical building design from its period of construction.

The firm of Stone and Mulloy designed the B/C Wing in 1945. Stone and Mulloy operated from 1927 until 1967 and specialized in hospital design. When Silvio P. Marraccini and S.P. Patterson joined the firm in 1951 and 1955, respectively, the name of the firm was lengthened to include the names of the new partners. The firm was quite prolific and completed work for the Vallejo General Hospital, the Marysville Hospital, the Pittsburg Community Hospital, and the Walter Reed Army Medical Center. Although the B/C Wing is representative of the type of projects on which the firm of Stone and Mulloy worked, the design largely reinterpreted the original A/B Wing (Baby Hospital). Other Stone and Mulloy hospital buildings serve as stronger examples of the firm's mid-century work.

Criterion 4 (Information Potential)

The “potential to yield information important to the prehistory or history of California” typically relates to archeological resources, rather than built resources. When Criterion 4 does relate to built resources, it is for cases when the building itself is the principal source of important construction-related information. Based on historic research, Criterion 4 is not applicable to the B/C Wing.

B/C Wing Integrity

In addition to being determined eligible under at least one of the four California Register criteria, properties deemed to be significant must also retain sufficient historical integrity. Though the B/C Wing was not found to be individually significant under any California Register criteria and is therefore not eligible for listing, the following section evaluates the integrity of the B/C Wing for informational purposes.

The B/C Wing maintains integrity of location, workmanship, and association; a moderate degree of integrity of design and materials; and no longer retains integrity of setting or feeling from its period of construction. A detailed evaluation of the B/C Wing's integrity according to each aspect follows.

Location

The B/C Wing retains integrity of location. The building's location has not changed, though the hospital complex has expanded into the surrounding Temescal neighborhood.

Setting

When the B/C Wing was constructed, the hospital was still located at the center of a residential block and faced south onto 51st Street (street no longer extant). The main entry was located in the A/B Wing (Baby Hospital), immediately adjacent to the B/C Wing connection. This entrance was remodeled and continued to serve as the complex's primary entrance until the five-story Patient Tower was constructed north of the B/C Wing. The Patient Tower has an angled entrance, facing northwest onto Martin Luther King Jr. Way and 52nd Street, which supplanted the entrance at the courtyard as the primary entrance. A third-story addition was constructed on the east-west ell of the B/C Wing in 1958 and a first story addition to the east façade in 1987, as well as additions to the complex adjacent to the B/C Wing (including the West Site Plant (1979), Patient Tower (1982), and various office trailers to the south) have obscured the B/C Wing. From the main entrance at 52nd Street, the B/C Wing cannot be seen. The relocation of the primary entrance has altered the way in which the building is approached and significantly changed the visibility and understanding of the B/C Wing, which now reads as a secondary structure at the rear of the hospital complex.

The few remaining aspects of setting that remain intact are the B/C Wing's spatial relationship to the A/B Wing (Baby Hospital) across a courtyard, and its proximity to the mature magnolia tree that has been located on the site since circa 1860.

When the B/C Wing was constructed in 1946, it was designed to be consistent with the size and scale of the A/B Wing (Baby Hospital). The A/B Wing, in turn, was designed to maintain a scale that was compatible with the surrounding neighborhood, which consisted primarily of small, wood frame bungalows and cottages that were one to two stories tall. Later additions to the complex further altered its overall massing and size. The addition of the two-story, box-like Diagnostic and Treatment Center (1962) and its third story (1974), and the construction of the five-story Patient Tower served to overshadow the lower profile A/B and B/C Wings.

Furthermore, the setting of the residential neighborhood surrounding the hospital changed over time. Not only were residences to the south and north of the hospital removed to make way for hospital expansion during the 1950s, the Grove Shafter Freeway (State Route 24) was constructed immediately to the east in 1968, and an off-ramp to Grove (now Martin Luther King Jr. Way) was placed immediately south of the Research Center. Grove was widened in the 1960s, as well, and an elevated BART track was installed by 1972.

The extensiveness of the alterations to the complex's overall form—the cumulative impact of the size, massing, form, and location of the additions—have compromised the B/C Wing's integrity of setting. Additionally, the hospital complex no longer retains a strong relationship to its residential neighborhood setting, which has also seen major alterations since the B/C Wing was constructed.

Design

When evaluated independently of the A/B Wing (Baby Hospital) or major additions to the complex, the B/C Wing retains a moderate degree of integrity of design as a hospital addition from the early post-war era. Most notably, the characteristics that are most intact include the narrow linear form, solarium, and double-loaded corridor. The building's style, which reinterprets the Northern Italian Renaissance style of the A/B Wing, is also intact. This includes details such as engaged columns and molded friezes at the solarium. The exterior does feature alterations that detract from the building's integrity of design, including a 1958 addition of a third story to the west of the A/B Wing connection on the east-west ell. In 1987, the brick porch that mirrored the one on the A/B Wing was enclosed with an addition on the east facade. This addition features large steel-sash ribbon windows that differ in style from the original ribbon windows at the second floor, as well as a smooth metal frieze and triangular rain catchments with metal downspouts.

Although the double-loaded corridor and staircases have been modernized and brought up to code, the B/C Wing retains its overall interior circulation pattern. Other finishes have also been updated; however, it is typical for alterations to be made to the interior of buildings such as hospitals in order to accommodate technological advances and modernization.

In sum, the B/C Wing retains only a moderate level of integrity of design because it has been compromised in the above-mentioned ways. The large additions to the complex are addressed under integrity of setting.

Materials

The exterior materiality of the B/C Wing remains largely intact. The brick cladding and terra cotta ornamentation, as well as the original fenestration pattern and windows for most of the wing are extant. The biggest losses of original material have come with the additions. For example, the 1987 addition to the east façade removed the ground floor wall and window materials, and the addition of the West Site Plant (1979) and Patient Tower (1982) also likely removed materials. The rest of the B/C Wing appears intact, though some of the basement-level windows on the east façade have been infilled with metal plates and air conditioning units.

On the interior, most materials have been updated. Drywall partitions have been erected throughout, as well as carpeting or vinyl flooring and drop ceilings with fluorescent lights.

In sum, the material integrity of the B/C Wing remains in part on the exterior, but has been greatly compromised on the interior. On the whole, integrity of materials is moderate.

Workmanship

The B/C Wing exhibits some decorative detail that generally mimics the ornament of the A/B Wing (Baby Hospital). This includes the fluted engaged columns at the solarium which displays capitals with acanthus leaves, urns, fleur-de-lis, bambino heads, and griffins; molded, friezes depicting animal and bird motifs; and a terracotta circle-and-sheaf frieze below the second story roofline. Since these decorative details remain intact, the B/C Wing retains integrity of workmanship.

Feeling

The B/C Wing’s integrity of feeling has significantly changed because it is no longer accessible to the general public. It is not visible from public streets, and the building has been incorporated into a larger complex of structures that are more modern in architectural style. The wing is visible from the courtyard to the south of the building, but the massing and size of the numerous additions on its north, west, and east sides, and the number of free-standing buildings and structures that have been added to the complex as a whole, have altered the feeling of the scale of the A/B and B/C Wings, which was comparable to the surrounding residential neighborhood. Ultimately, the building is able to convey a moderate level of integrity of feeling related to its aesthetic expression since the original design, materials, and workmanship remain in part and can convey the period of its construction. However, the historic sense of this building as half of a U-shaped complex has been compromised due to the numerous additions, the shift in location of the primary public entrance, and other changes in setting. Overall, the building no longer retains integrity of feeling.

Association

The B/C Wing has continuously operated as a hospital for children, in association with the A/B Wing (Baby Hospital), since its construction in 1946 and therefore retains its historic association.

Conclusion

In conclusion, the B/C Wing is not eligible for individual listing in the California Register of Historical Resources.

C. EVALUATION OF A/B WING AND B/C WING TOGETHER

The California Register of Historical Resources

Criterion 1 (Events)

The individual resource evaluations for the A/B Wing and the B/C Wing have described how the A/B Wing possesses individual significance and the B/C Wing does not. The A/B Wing is significant for its contributions as a forerunner in children's hospitals and teaching facilities in Oakland, as well as for its architectural design. The period of significance for the A/B Wing as an individual resource is 1912-1926 for Criterion 1 (Events) and 1926 for Criterion 3 (Architecture). The B/C Wing was not associated with any particular events which would make it significant on its own

Criterion 2 (Persons)

The A/B Wing and B/C Wing do not appear to be eligible for the California Register under Criterion 2. Research has failed to reveal a significant association with any individuals that would justify inclusion of the two wings together in the California Register under this criterion.

Criterion 3 (Architecture)

When considered together as one entity, the two wings created a unified U-shaped plan and design. As described in the California Register evaluation for the B/C Wing as an individual resource, the building was constructed to fulfill Stone and Mulloy's Master Plan, which depicted the expansion of the Hospital with the addition of three- and four-story wings in a modern interpretation of the Northern Italian Renaissance style. The B/C Wing was designed as a compatible yet modern response to the design of the A/B Wing. It continued elements of the design of the A/B Wing with respect to the form, materials, scale, massing, and size. It featured a matching solarium to the west of the entrance and double-loaded corridors. Mirroring the A/B Wing, the B/C Wing originally contained offices, laboratories, and storerooms on the first floor and a patient ward on the second floor. On the exterior, the solarium featured matching ornament, though it was capped with a flat roof, and the addition continued the terracotta circle-and-sheaf frieze below the second story roofline. Because the form and layout of the new wing reflected the design of the A/B Wing more than it demonstrated advances in medical building design from its period of construction, the B/C Wing was not found individually significant for any innovation in design. However, within the context of compatible design within a master plan, the A/B Wing and B/C Wing together represent the initial vision of hospital expansion and are significant for their design within a period of significance of 1926-1948.

Therefore, evaluating the two wings together as one building results in a finding of individual significance under Criterion 3 (Architecture).

A/B Wing and B/C Wing Integrity

However, neither wing possesses sufficient integrity to represent their significance. Both have sustained alterations and additions to the wings themselves, as well as larger additions to the hospital complex. The overall setting, in terms of the hospital complex setting and the immediate neighborhood surrounding the hospital, has also been compromised.

Conclusion

In conclusion, though the two wings were found to be historically significant together under Criterion 3, they are not eligible for listing in the California Register due to lack of integrity.

D. THE BRUCE LYON MEMORIAL RESEARCH CENTER EVALUATION

The following section evaluates the Bruce Lyon Memorial Research Center for its eligibility for listing in the California Register of Historical Resources, including an evaluation of integrity (see pages 4-5 for evaluative criteria).

Criterion 1 (Events)

The Bruce Lyon Memorial Research Center does not appear to be eligible for the California Register under Criterion 1. Constructed in 1959, the Research Center building originally housed the Bruce Lyon Memorial Research Laboratory. In 1973, the Northern California Comprehensive Sickle Cell Center was established at the Research Center. Renamed the Children's Hospital Oakland Research Institute (CHORI) in 1986, it was the first research laboratory in Northern California dedicated exclusively to children's diseases. As CHORI, the Research Center achieved notable successes with cord blood bone marrow transplants and was the first North American research institute to cure a child with alpha thalassemia major through transplants; however, this event occurred after CHORI had moved out of the Research Center building in 1999. Most of CHORI's work at the Research Center occurred in recent decades (less than 50 years ago) and some of their greater medical successes occurred after the organization had vacated the Research Center. Therefore, the Bruce Lyon Memorial Research Center does not appear eligible under Criterion 1.

Criterion 2 (Persons)

The Bruce Lyon Memorial Research Center does not appear to be eligible for the California Register under Criterion 2. Although prominent persons have been associated with CHORI, research has failed to reveal a significant association that would justify the building's inclusion in the California Register under this criterion.

Criterion 3 (Architecture)

The Bruce Lyon Memorial Research Center does not appear to be eligible for the California Register under Criterion 3. The original one-story building features brick trim in stacked courses and curtain wall systems comprised of metal panels and fixed and awning sash windows. Though it uses mid-century materials and design vocabulary, it is not a distinguishable design and does not appear significant for its architecture. It does not display high artistic values, either. Furthermore, the building sustained the major addition of a second floor in 1972, which dwarfs the original building, as well as a rear addition in 1992.

The architecture firm of Stone, Marraccini and Patterson are responsible for the design of the Bruce Lyon Memorial Research Center. They also designed the Ford Diagnostic and Treatment Center (1962) at the Children's Hospital, as well as numerous other hospital and medical buildings through the 1970s and 1980s. Though they were prolific in the design of this property type, the Bruce Lyon Memorial Research Center is a rather simple example of a medical building and compared to this building, there are likely better examples (with higher integrity) from their portfolio of work. Therefore, the Bruce Lyon Memorial Research Center is not significant in association with this architecture firm.

Criterion 4 (Information Potential)

The “potential to yield information important to the prehistory or history of California” typically relates to archeological resources, rather than built resources. When Criterion 4 does relate to built resources, it is for cases when the building itself is the principal source of important construction-related information. Based on historic research, Criterion 4 is not applicable to the Bruce Lyon Memorial Research Center.

Conclusion

The Bruce Lyon Memorial Research Center does not qualify as a historical resource under CEQA, since it is not significant under any California Register criteria and therefore not eligible for listing in the California Register.

Bruce Lyon Memorial Research Center Integrity

In addition to being determined eligible under at least one of the four California Register criteria, properties deemed to be significant must also retain sufficient historical integrity. Though the Bruce Lyon Memorial Research Center was not found to be individually significant under any California Register criteria and is therefore not eligible for listing, the following section evaluates the integrity of the Research Center for informational purposes.

The Bruce Lyon Memorial Research Center maintains integrity of location, materials, and workmanship; a moderate degree of integrity of association; and no longer retains integrity of setting, design, or feeling from its period of construction. A detailed evaluation of the Research Center’s integrity according to each aspect follows.

Location

The location of the Bruce Lyon Memorial Research Center has not changed. The hospital complex has expanded into the surrounding Temescal neighborhood, but the Research Center remains in its original location at the south end of the complex.

Setting

When the Research Center was constructed in 1959, the hospital was still located at the center of a residential block and faced south onto 51st Street (street no longer extant). Numerous houses were removed between 1951 and 1959 that faced Dover to the east, 51st Street to the north, and Grove (now Martin Luther King Jr. Way) to the west. The Research Center was constructed at the south end of the cleared site, surrounding by paved surface parking lots. The surrounding parking lots have also been built on, obscuring the Research Center’s view and connection to the main hospital building. For example, the helistop and portable buildings were constructed north of the Research Center, and other portable offices were installed to the east. An addition was also constructed immediately south of the Research Center in 1992.

In the surrounding neighborhood, the Grove Shafter Freeway (State Route 24) was completed in 1968, and an off-ramp to Grove was placed immediately south of the Research Center. Grove was widened in the 1960s, as well, and an elevated BART track was installed by 1972. The original

entrance to the building was on the west side adjacent to Grove Street, but the site has since been fenced off from the street and the entrance was shifted to the east side of the building.

The extensiveness of the alterations to the complex's overall form—the cumulative impact of additions and portable buildings—have compromised the Bruce Lyon Memorial Research Center's integrity of setting. Additionally, the building no longer retains a strong relationship to the neighborhood setting, which has been greatly altered since the building was constructed.

Design

Characteristics of the original building that are most intact include its curtain walls comprised of metal panels and fixed and awning sash windows. However, this mid-century design is greatly overshadowed by the large second-story addition that was constructed in 1972. The stuccoed addition is supported by concrete posts, rests on top of the original building, and projects in volume at all facades beyond the footprint of the original building. The building's original primary entrance is set in an enclosed glazed portico located on the west side of the building. However, this entrance is no longer in use, and the contemporary primary entrance is located on the east façade at the northeast corner of the building. Thus, the building's original orientation and interior circulation has been altered. Another addition was also constructed in 1992 at the rear of the building, further obscuring its original size and low-slung massing, and detracting from its design.

In sum, the Research Center does not retain integrity of design because the original design, scale, and massing has been so overshadowed on all sides by the building's additions.

Materials

The exterior materiality of the original 1959 building remains largely intact. The brick coursing and steel frame wall system with metal panels and windows has been retained. The two additions sit on the original building's roof and to the south, but their placement did not remove material from the original facades. Thus, the Bruce Lyon Memorial Research Center retains integrity of materials.

Workmanship

The Research Center exhibits little in the way of decorative elements or ornament. Most of the materials are mass-produced and applied as assemblies. However, since the original building's materials remain largely intact, integrity of workmanship is retained.

Feeling

The Bruce Lyon Memorial Research Center's integrity of feeling has changed due to its large additions and the changes that have occurred in the larger complex. The building is no longer isolated at the south end of the hospital site and surrounded by surface parking; rather, it is now enclosed by the helistop, portable offices, and additions on the roof and to the south. In addition to changes in surrounding spatial relationships, the 1972 and 1992 additions have obscured the building's original massing and height. Consequently, integrity of feeling related to its aesthetic expression is impacted since the original design, has been overshadowed and does not clearly convey the period of its construction. The historic sense of this building as a medical building designed in

1959 has been compromised due to the above-referenced changes. Overall, the building no longer retains integrity of feeling.

Association

The Bruce Lyon Memorial Research Center has continuously operated as a medical laboratory within the Children’s Hospital complex. However, it is no longer associated with the Children’s Hospital Oakland Research Institute (CHORI). Therefore, it retains a moderate level of integrity related to association.

Conclusion

In conclusion, the Bruce Lyon Memorial Research Center is not eligible for individual listing in the California Register of Historical Resources.

E. THE FORD RESEARCH AND DIAGNOSTIC CENTER EVALUATION

The following section evaluates the Ford Research and Diagnostic Center for its eligibility for listing in the California Register of Historical Resources. It then evaluates the integrity of the Ford Research and Diagnostic Center (see pages 4-5 for evaluative criteria).

Criterion 1 (Events)

The Ford Research and Diagnostic Center does not appear to be eligible for the California Register under Criterion 1. The building was constructed in 1962 in part with a \$450,000 endowment from William H. and Helen C. Ford. The building was constructed for the purpose of expanding ambulatory outpatient services, laboratory uses, and x-ray facilities. While these uses have been important for the functionality of the hospital, they do not appear to have been significant at a level that would qualify the building for listing in the California Register under this criterion.

Criterion 2 (Persons)

The Ford Research and Diagnostic Center does not appear eligible for the California Register under Criterion 2. Although prominent people have been associated with research at Children’s Hospital, research has failed to reveal a significant association that would justify the building’s inclusion in the California Register under this criterion.

Criterion 3 (Architecture)

The Ford Research and Diagnostic Center does not appear to be eligible for the California Register under Criterion 3. The original two story building includes ribbon windows, full-height glass entry bay, an asymmetrical primary façade, and an emphasis on horizontal planes with minimal ornamentation. Though it uses International style design elements and typical materials from that design era, it is not a distinguishable design and does not appear significant for its architecture. It does not display high artistic values, either. Furthermore, the building sustained a third story addition in 1974 that diminished its original design.

The architecture firm of Stone, Marraccini and Patterson are responsible for the design of the Ford Research and Diagnostic Center. They also designed the Bruce Lyon Memorial Research Center (1958) at the Children’s Hospital, as well as numerous other hospital and medical buildings through the 1970s and 1980s. Though they were prolific in the design of this property type, the Ford Research and Diagnostic Center is a rather simple example of a medical building and compared to this building, there are likely better examples (with higher integrity) from their portfolio of work. Therefore, the Ford Research and Diagnostic Center is not significant in association with this architecture firm.

Criterion 4 (Information Potential)

The “potential to yield information important to the prehistory or history of California” typically relates to archeological resources, rather than built resources. When Criterion 4 does relate to built resources, it is for cases when the building itself is the principal source of important construction-related information. Based on historic research, Criterion 4 is not applicable to the Ford Research and Diagnostic Center.

Conclusion

According to CEQA, the Ford Research and Diagnostic Center does not qualify as a historic resource since it is not significant under any California Register criterion and therefore is not eligible for listing in the California Register.

Ford Research and Diagnostic Center Integrity

The following section will evaluate the integrity of the Ford Research and Diagnostic Center. Evaluative criteria are described in detail on pages 4-5 of this report.

The Ford Research and Diagnostic Center maintains integrity of location, materials, and workmanship; a moderate degree of integrity of association; and no longer retains integrity of setting, design, or feeling from its period of construction. A detailed evaluation of the building's integrity according to each aspect follows.

Location

The location of the Ford Research and Diagnostic Center has not changed. The hospital complex has expanded into the surrounding Temescal neighborhood, but the Ford Research and Diagnostic Center remains in its original location at the north east corner of the complex.

Setting

When the Ford Research and Diagnostic Center was constructed in 1962, it was the third addition to the Children's Hospital site (after the B/C Wing and the Bruce Lyon Memorial Research Center) and was visible from three facades (east, north, and west). It replaced several small scale residential buildings at the north east corner of the Hospital's site and faced onto a residential section of Dover Street. The construction of the Grove Shafter Freeway in 1968 directly to the east of the building, and the resulting cessation of Dover Street as a through-street south of 52nd Street changed the setting of the Ford Research and Diagnostic Center, making it less visually accessible to the surrounding neighborhood. The construction in 1982 of the Patient Tower further removed the Ford Research and Diagnostic Center from public view; after this date only the north façade was readily visible to the public, and the entrance and the former primary (east) façade was switched to an emergency exit. The 1993 addition of the Cardiac Catheterization Lab further altered the setting of the Ford Research and Diagnostic Center, blocking visual access to the southern façade.

The extensive alterations to the complex's overall form have compromised the Ford Research and Diagnostic Center's integrity of setting. Additionally, the building no longer retains a strong relationship to the neighborhood setting, which has been greatly altered since the building was constructed.

Design

When evaluated independently of its addition, the Ford Research and Diagnostic Center generally retains integrity of its International-style design, including ribbon windows, full-height glass entry bay, an asymmetrical primary façade, and an emphasis on horizontal planes with minimal ornamentation. However, the integrity of many of these design elements has been compromised by changes to the building and the site. The addition of the Patient Tower in 1982 necessitated the

alteration of the westernmost bay of the north façade of the Ford Research and Diagnostic Center. The primary entrance of the Ford Research and Diagnostic Center was also shifted at this time: access to the building is gained from inside the Patient Tower, and the original primary entrance is now an emergency exit. The 1974 addition of a third story also compromised the original building's emphasis on horizontal planes and changes the massing of massing and scale of the building. In sum, the Ford Research and Diagnostic Center has diminished integrity of design due to alterations to the building and additions to the Hospital site.

Materials

The exterior materiality of the original 1962 building remains largely intact, including ribbon windows, metal spandrel panels and window sashes, and stucco cladding. Certain areas of the building's north façade were changed to accommodate the addition of the Patient Tower. The addition of the third story in 1974 did not remove materials from the original facades. Therefore the building retains integrity of materials.

Workmanship

The Ford Research and Diagnostic Center displays little in the way of decorative elements or ornament. Most of the materials are mass produced and applied as assemblies. However, since the building's original materials remain largely intact, the building retains integrity of workmanship.

Feeling

The Ford Research and Diagnostic Center's integrity of feeling has changed due to additions at the Hospital site and changes to the surrounding neighborhood. The Ford Research and Diagnostic Center was, at the time of its construction, the Hospital building with the strongest street presence; it was the only hospital building with an entrance located along a public street, it had facades facing both 53rd Street and Dover Street, and the west façade was next to a surface parking lot and was visible from 53rd Street and Grove Street. The construction of the Grove Shafter Freeway in 1968 changed this relation to the neighborhood, and the construction of the Patient Tower in 1982 changed it even further. The feeling of the actual building changed with the addition of a third story in 1974 and the cessation of the use of the entrance at the east façade as the primary entrance. Dover Street stopped being used as a through street south of 52nd Street, as well, further changing the feeling of the Ford Research and Diagnostic Center. In sum, changes to the building and to the building's surroundings have severely lowered the building's integrity of feeling.

Association

The Ford Research and Diagnostic Center has continuously been used as a medical laboratory within the Children's Hospital complex. Its original use as a space for ambulatory outpatient care has been shifted to the Outpatient Center, constructed north of 52nd Street in 1993. Therefore, the Ford Research and Diagnostic Center retains a moderate level of integrity of association.

Conclusion

In conclusion, the Ford Research and Diagnostic Center is not eligible for individual listing in the California Register of Historical Resources.

F. EVALUATION OF MAGNOLIA TREE

The magnolia tree does possess a level of significance as the remaining extant tie to the McElrath mansion which housed the original Baby Hospital. However, this association does not raise the tree to a level of significance that it would be eligible for listing as an individual resource in the California Register. In addition, it was planted well before the Hospital was conceived, not in direct relationship to the Hospital's development, and has no association with reasons for which the hospital is significant. It does not appear that the tree was planted as part of a broader landscape design. Furthermore, its setting has completely changed from the era of its planting. Therefore, it does not qualify as a historic resource (landscape object).

G. EVALUATION OF OTHER BUILDINGS ON THE MAIN HOSPITAL SITE

The other buildings in the hospital complex were not evaluated for listing in the California Register or for listing as a City of Oakland Designated Historic Property, as they are less than forty-five years old and do not possess a level of significance that would qualify them for listing despite their more recent construction dates. These buildings include the Central Plant/West Site Plant (1979), Patient Tower (1982), Cafeteria (1987), Outpatient Center (1993), Parking Garage (1993), Cardiac Catheterization Lab (1993), Bruce Lyon Memorial Center Addition (1992) and the Helistop (2000).

H. EVALUATION OF THE HOSPITAL COMPLEX AS A HISTORIC DISTRICT

Historic districts are made up of components which are significant only when grouped together, rather than collections of individually significant buildings. Districts must work together to tell the story of their significance and must have distinguishable boundaries. Typically, while working toward understanding the historic context and significance of an area, historic districts become apparent. Boundaries of a historic district are frequently defined by use, connection to an event, or architectural style. Historic districts will include both contributors and non-contributors, and not all resources need to be of the same historical or architectural quality. The district functions as a group, and includes both contextual buildings and the stand-outs which help anchor a district.

Eligibility for listing for historic districts in the California Register, just as for individual resources, is based on two factors: Criteria and Integrity. Criteria are a means of evaluating a resource's historical significance. In addition to embodying one or more of the necessary criteria, it is also imperative that the district have sufficient integrity. In the case of historic resources, integrity is defined as the physical characteristics which must be maintained in order to allow a resource to convey its historical significance.

Based on the evaluation below, the study area of the Children's Hospital and Research Center (which does not include the CHORI site) does not possess sufficient significance or integrity as a whole to be eligible as a historic district in the California Register.

Criterion 1 (Events)

The Children's Hospital and Research Center does not possess significance as a whole to be eligible as a historic district in the California Register under Criterion 1. The property is primarily significant

for its early contributions to children's healthcare and as a teaching hospital in the early 20th century. It is also associated with important research conducted at the Children's Hospital Oakland Research Institute (CHORI). However, the complex as a whole is not associated with CHORI or its research contributions. And while the magnolia tree adjacent to the B/C Wing has some association with the Hospital, specifically the fundraising organization that supports the Hospital ("The Branches"), it was not planted in relation to the Hospital and as such is primarily associated with a much earlier era outside of the Hospital site's general period of development. The Hospital complex grew over many years, and most of the recent buildings do not contribute directly to associations with any particular events. Thus, the period of significance under Criterion 1 remains primarily associated with the earliest years (1912-1926), which are represented only by the A/B Wing.

Criterion 2 (Persons)

The Children's Hospital and Research Center does not appear to be eligible for the California Register as a historic district under Criterion 2. Although prominent persons have been associated with the hospital and CHORI, research has failed to reveal a significant association that would justify the entire complex's inclusion in the California Register as a historic district in association with any particular person.

Criterion 3 (Architecture)

The Children's Hospital and Research Center complex is also not significant under California Register Criterion 3 because the various buildings were constructed in different decades and in a variety of architectural styles. Aside from the B/C Wing, which was designed in the vocabulary of the original A/B Wing, the other buildings do not attempt to be stylistically or materially compatible with the early buildings. Each was designed in a style popular during its years of construction. Further, the additions were generally constructed in an ad-hoc fashion, without following a design master plan and without any unifying architectural theme. As a result, the main hospital building is a large mass comprised of many additions. Construction dates on the site range from 1926 to 1993, and the complex as a whole does not represent a particular type, period, or method of construction or represent high artistic values. Different architecture firms were involved in the designs of each section and the complex as a whole is not associated with any one firm to the extent that it would be considered historically significant in association. Thus, there is no period of significance associated with architecture beyond construction of the A/B and B/C Wings from 1926-1948.

Criterion 4 (Information Potential)

The "potential to yield information important to the prehistory or history of California" typically relates to archeological resources, rather than built resources. When Criterion 4 does relate to built resources, it is for cases when the building itself is the principal source of important construction-related information. Based on historic research, Criterion 4 is not applicable to the Children's Hospital and Research Center as a historic district.

Conclusion

According to CEQA, the Children’s Hospital and Research Center does not qualify as a historical resource, since it is not significant under any California Register criteria and therefore not eligible for listing in the California Register.

Children’s Hospital and Research Center Integrity

In addition to being determined eligible under at least one of the four California Register criteria, a historic district deemed to be significant must also retain sufficient historical integrity. Though the Children’s Hospital and Research Center was not found to be significant as a historic district under any California Register criteria and is therefore not eligible for listing, the following section evaluates the integrity of the complex for informational purposes.

Integrity for historic districts is largely a factor of the ratio of contributing resources to non-contributing resources. Determining which properties are contributing versus non-contributing depends on whether they are associated with the historic district’s reason for significance; whether they were constructed or existed during the period of significance; and whether they each retain sufficient integrity as individual buildings to represent that period and reason for significance. Typically, a two-thirds majority of contributing resources is desired, though at least half of the resources should be contributors. This is important so that the historic district can convey its significance.

The Children’s Hospital complex contains 12 permanent stand-alone buildings and large additions, as well as several semi-permanent portable buildings. All but four are under 45 years of age and would therefore not be considered historic resources individually. Their dates of construction are too recent to be able to understand their context with sufficient historical perspective, and were constructed outside a potential period of significance. Three of the four age-eligible resources are not individually significant, and none of them retain integrity. Only the A/B Wing was constructed within the period of significance. Therefore, the Children’s Hospital complex would not be eligible as a historic district because it does not possess any contributors.

VII. EVALUATION OF CHILDREN’S HOSPITAL FOR ELIGIBILITY AS A CITY OF OAKLAND DESIGNATED HISTORIC PROPERTY

This section of the report will evaluate the four buildings at the Children’s Hospital site that are more than 45 years old. Evaluative criteria for these evaluations are included in Appendix D of the Historic Preservation Element of the Oakland General Plan and have been described briefly on pages 8-9 of this report.¹⁷⁴ The full excerpted Appendix D is located in the Appendix of this report for reference.

In order to determine whether a property is eligible as a landmark, the property is rated on an Evaluation Sheet for each of fourteen evaluation criteria.¹⁷⁵ The ratings are then converted to numerical scores and added together for a total score, which is then converted into an overall rating—A, B, C, or D. Buildings of no interest are given E ratings and buildings that are too recent to rate are giving a rating of F (synonymous with the use of *). A property that has been altered or that is less than fifty years old may also have a contingency rating shown by a lowercase letter, indicating that the property may be eligible for a higher rating in the future. Buildings also receive a numerical rating indicating their association with a district: 1 indicates the building is in an Area of Primary Importance (API), 2 indicates that the building is in an Area of Secondary Importance (ASI), and 3 indicates that the building is not associated with a district. A “+” indicates that a building is a contributor to the district, a “-” indicates that it is not a contributor, and a “*” indicates that it is a potential contributor.

A. A/B WING (BABY HOSPITAL)

The Oakland Cultural Heritage Survey assigned the A/B Wing (Baby Hospital) a preliminary rating of “Cb3” based on a reconnaissance survey and cursory research. This rating means that the building has secondary importance, but with more information could be elevated to a rating of “B,” which would signify that the building is of major importance. The “3” rating indicates that the Baby Hospital is not located within a historic district. In the particular case of the Baby Hospital, the dual rating reflects uncertainty about the degree to which the historical and architectural integrity of the building has been affected by additions and alterations.

A brief explanation of the evaluation, including each of the fourteen evaluative criteria, follows. Ratings for the categories of Architecture, History/Association, and Context below are: Excellent (E), Very Good (VG), Good (G), and Fair/Poor (FP).

A. Architecture

1. Exterior/Design

The A/B Wing (Baby Hospital) has very good (VG) quality of form, detailing and overall visual quality. The building was designed in the Northern Italian Renaissance style, and includes the low

¹⁷⁴ City of Oakland, Oakland General Plan, Historic Preservation Element, Sept. 1993.

¹⁷⁵ Both the OCHS and the Landmarks Preservation Advisory Board (LPAB) criteria and evaluations determine eligibility for Oakland’s Local Register. Using either would determine if a building, structure, object, or site is eligible for the Local Register. The OCHS criteria are based on the National and California Register criteria, which has already been analyzed in the Historic Resource Evaluation. Therefore, using the LPAB criteria gives an alternate evaluation, making the analysis more comprehensive in determining which properties warrant preservation.

pitched tile roofs, rhythmic fenestration pattern, first and second story porches and balconies, chimney with arcaded cap, two solarium bays, terra cotta cornice, and ornamental detailing of that style. Ornamental detail includes floral and acanthus-leaf motifs, urns, fleur-de-lis, cherub's heads, and griffins.

2. Interior

The space is largely reconfigured due to evolving use needs, but some original details remain in place. However, in the City of Oakland's evaluation process, ratings are only provided for interiors of public buildings, and the A/B Wing (Baby Hospital) is not a public building. Therefore, the interior of the A/B Wing (Baby Hospital) does not receive a rating.

3. Construction

Construction is good (G). The A/B Wing (Baby Hospital) is a reinforced concrete building clad in pressed brick, a construction type which reflects its era of construction as well as the programmatic needs of the hospital (1926). Construction materials also include terra cotta, roof tiles, and multi-paned large solarium windows.

4. Designer/Builder

Designer/Builder rating is good (G), indicating that Edward W. Cannon is a designer of tertiary importance. Cannon built a handful of buildings in Oakland and the Bay Area, most notable of which is the six-story addition to Kahn's Department Store, which is listed on the National Register. However, he was not an especially active designer and his contributions do not elevate him to the level of primary or secondary importance.

5. Style/Type

Style/Type is very good (VG), as the design of the A/B Wing (Baby Hospital) embodies many early 20th century hospital design trends. The building is narrow and linear in form and is clad in brick and terra cotta to fireproof the structure and prevent the spread of contagious disease. Oriented to the south to maximize its exposure to sunlight, the building includes solariums and a high number of windows to ensure light and airflow. The floor plan also contains a large open-plan ward to allow nurses to maintain surveillance of the maximum number of patients at one time. The building is also a very good example of the Northern Italian Renaissance style.

B. History/Association

6. Person/Organization

The A/B Wing (Baby Hospital)'s association with a Person/Organization is very good (VG). The A/B Wing (Baby Hospital) is the oldest extant building associated with the establishment of the Baby Hospital, the first children's hospital in the East Bay. The site is intimately connected to a benevolent organization that played a major role in the development of improving the health of the community of Oakland, and has remained in operation in this use since its construction.

7. Event

Although the site of ongoing important personal-level events, no specific significant event was found to have happened at the A/B Wing (Baby Hospital), and therefore receives a rating of FP (no connections with event of importance).

8. Patterns

The A/B Wing (Baby Hospital) effectively illustrates a broad pattern of Oakland history, namely the establishment of care for the city's children. The site is intimately connected to a pattern of secondary importance, and as such qualifies for a rating of very good (VG).

9. Age

The A/B Wing (Baby Hospital) was constructed in 1926 to house an organization that had been established in 1912 and housed originally in a Queen Anne residential building. Both the extant building and the Baby Hospital organization date from the era between May 1906 and 1945, which qualifies it for a rating of good (G).

10. Site

The A/B Wing (Baby Hospital) is located on the site on which it was constructed and therefore receives a rating of excellent (E).

C. Context

11. Continuity

The A/B Wing (Baby Hospital) receives an FP rating for continuity because the building is not located in an Area of Primary Importance (API) or an Area of Secondary Importance (ASI).

12. Familiarity

The A/B Wing (Baby Hospital) receives G/FP rating for familiarity. The associated numerical score is an average between G and F (see Appendix). The additions to the A/B Wing, as well as the addition of other hospital buildings directly adjacent to the A/B Wing, have largely obscured it from public view within the neighborhood. In addition, connection between the A/B Wing and the surrounding neighborhood has been weakened by the construction of the elevated Grove-Shafter Freeway (State Route 24) and adjacent on-ramp, the closure of 51st Street, and the closure of Dover Street south of 52nd Street to public access. The east façade of the A/B Wing (Baby Hospital) is visible from the elevated Grove-Shafter Freeway, so the building is marginally conspicuous or familiar within the neighborhood, city, and region.

D. Integrity

Ratings in this category are Excellent (E), Good (G), Fair (F), and Poor (P).

13. Condition

The A/B Wing (Baby Hospital) receives a good (G) rating for condition, which is a measure of surface wear or structural problems to the building. The building exhibits only minor deterioration of this sort.

14. Exterior and Alterations

The A/B Wing (Baby Hospital) has undergone a series of alterations which brings its rating in this category to good (G)/Fair (F). The associated numerical score is an average between G and F (see Appendix). The addition in 1946 of the B/C Wing expanded the A/B Wing (Baby Hospital) from its original L-shaped design into a new U-shaped configuration to accommodate the second phase of Douglas Stone’s master plan. However, only the B/C Wing was constructed per the master plan and even this wing, though similar, was not constructed exactly as originally proposed. The additions ca. 1948 and ca. 1962 to the third story at the northeast corner of the building and the removal in 1962 of the original colonnade porch at the southwest portion of the building and replacement with a two-story entrance lobby changed the scale of the building again as well as its primary point of entry. In addition, other alterations have occurred over time, including metal awnings over some windows; contemporary walkways, ramps, and metal railings to approach the building; stairs at the southwest corner leading to the west porch; metal security gates at the first floor patio and second floor balcony; solid infill of window and door openings; air conditioning units in place of glass panes in the windows; and composite roofing. However, these alterations are relatively minor and a majority of materials on those facades remain intact.

Conclusion

Page & Turnbull’s intensive survey and evaluation assigns the A/B Wing (Baby Hospital) a rating of “B3,” signifying that the building is of secondary importance, not located in a district or area of importance.

B. THE B/C WING

The Oakland Cultural Heritage Survey has not assigned the B/C Wing a preliminary rating. A brief explanation of the evaluation, including each of the fourteen evaluative criteria, follows. Ratings for the categories of Architecture, History/Association, and Context below are: Excellent (E), Very Good (VG), Good (G), and Fair/Poor (FP).

A. Architecture

1. Exterior/Design

The B/C Wing has good (G) quality of form and detailing, with good overall visual quality. The form of the building was designed to match that of the A/B Wing (Baby Hospital), and the footprint is the inverse of the A/B Wing (Baby Hospital). It is a modern compatible addition with respect to form, materials, scale, massing, and size. Overall detailing replicates the ornament on the A/B Wing (Baby Hospital) and new detailing is simplified. However, the design is not distinguished individually within its era of construction (1946-1948).

2. Interior

The interior of the B/C Wing was not surveyed for this report; it includes intensive care areas of the hospital and was not available for survey. Furthermore, in the City of Oakland’s evaluation process, ratings are only provided for interiors of public buildings, and the B/C Wing is not a public building. Therefore, the interior of the B/C Wing does not receive a rating.

3. Construction

The B/C Wing receives a good (G) rating for construction. It is a steel reinforced concrete building with pressed brick cladding, characteristic of its era of construction.

4. Designer/Builder

Designer/Builder is good (VG). The B/C Wing was constructed by the firm of Stone and Mulloy, which became known for their hospital designs and designed approximately 20 hospitals and medical buildings in Northern California in the post-war era, including Peralta Hospital in Oakland (1950), Eden Hospital in Castro Valley (1954), and Pacific Presbyterian Medical Center in San Francisco (1960). The firm changed names and partners over the years but continued to specialize in hospital design and designed at least two additional buildings at Children’s Hospital. Thus, the B/C Wing is associated with this firm of secondary importance in the region.

5. Style/Type

The B/C Wing receives a rating of good (G) for style/type criterion. The building is a good example of simplified modern architectural style that reinterprets the A/B Wing (Baby Hospital). However, the building was constructed in form to match the older A/B Wing (Baby Hospital), and as such it is not a very good or excellent example of hospital design during its era of construction, during which the “Nightingale ward” design seen at the A/B Wing (Baby Hospital) was being replaced with the block plan in response to changing interior spatial needs.

B. History/Association

6. Person/Organization

The B/C Wing receives a rating of good (G) for this criterion, as it was constructed to house the expanding needs of Children’s Hospital after the hospital’s primary period of significance. As such, it can be considered intimately connected to an organization of tertiary importance (prominent but not leading role) to the City’s development.

7. Event

Research has uncovered no specific significant events that took place at the B/C Wing. Thus, the building receives a FP rating for this criterion.

8. Patterns

The B/C Wing receives a good (G) rating for this criterion. The B/C Wing was built to provide continued care for Oakland’s growing population after World War II. However, this population surge had an effect on the city’s entire civic infrastructure, not specifically hospitals. The population increase could be considered a pattern of tertiary importance, garnering the B/C Wing a rating of good for this criterion.

9. Age

The building was constructed in 1946-1948 and as such receives an FP rating for this criterion.

10. Site

The building has not been moved and as such receives a rating of excellent (E) for this criterion.

C. Context

11. Continuity

The B/C Wing is not located in an API or ASI, and therefore receives an FP rating for this criterion.

12. Familiarity

The B/C Wing receives an FP rating for this criterion, due to the way changes in the area have largely removed the B/C Wing from public view. It is no longer conspicuous or familiar within its surrounding context. The construction of the Ford Research and Diagnostic Center in 1962, the construction of the Grove/Shafter Freeway (State Route 24) in 1968, the closure of 51st Street, the closure of public access to Dover Street south of 52nd Street, the construction of the West Site Plant in 1979, and the construction of the Patient Tower in 1982 have combined to severely alter and limit the B/C Wing’s familiarity within the neighborhood.

D. Integrity

Ratings in this category are Excellent (E), Good (G), Fair (F), and Poor (P).

13. Condition

The B/C Wing receives a good (G) rating for condition, which is a measure of surface wear or structural problems to the building. The building exhibits only minor deterioration of this sort.

14. Exterior and Alterations

The B/C Wing has undergone a series of alterations which lower its rating in this category to fair (E). A third story addition at the northern part of the building in 1958 altered the scale of the building. The construction of the West Site Plant in 1979 directly abutting the building changed the western façade and required the blinding and the alteration of several window groups. The construction of the Patient Tower in 1982 directly abutting the building completely obscured the building's original north façade. The enclosure of the porch at the first story of the east façade in 1987 continued to alter the building's original design and also impaired its stylistic relationship with the A/B Wing (Baby Hospital), which retains its original first story porch.

Conclusion

Page & Turnbull's intensive survey and evaluation assigns the B/C Wing a rating of **C3**, signifying that the building is of secondary importance, not located in a district or area of importance.

C. THE A/B WING AND B/C WING TOGETHER

The Oakland Cultural Heritage Survey did not assign the A/B Wing and B/C Wing together a preliminary rating based on a Reconnaissance Survey. A brief explanation of the evaluation, including each of the fourteen evaluative criteria, follows. Ratings for the categories of Architecture, History/Association, and Context below are: Excellent (E), Very Good (VG), Good (G), and Fair/Poor (FP).

A. Architecture

1. Exterior/Design

The A/B and B/C Wings together have very good (VG) quality of form and detailing. The A/B Wing was designed in the Northern Italian Renaissance style, and includes the low pitched tile roofs, rhythmic fenestration pattern, first and second story porches and balconies, chimney with arched cap, two solarium bays, terra cotta cornice, and ornamental detailing of that style. Ornamental detail includes floral and acanthus-leaf motifs, urns, fleur-de-lis, cherub’s heads, and griffins. The B/C Wing was designed as a compatible addition to the A/B Wing and incorporates many design cues from the A/B Wing, including replication of the detailing and configuration of the solarium bay, an extension of the terra cotta cornice, and massing and footprint that mimic the L-plan of the A/B Wing (rather than reflecting contemporary hospital design, which had by that point shifted to block massing). The B/C Wing also incorporates design updates that reflect its era of construction, such as larger multi-lite steel sash windows and a modern solarium at the southernmost façade. In sum, the building presents very good overall visual quality.

2. Interior

The City of Oakland’s evaluation process only provides ratings for interiors of public buildings. Therefore, the interior of the A/B and B/C Wings together does not receive a rating.

3. Construction

The A/B and B/C Wing together receive a good (G) rating for construction. Both wings are steel reinforced concrete buildings with pressed brick cladding, characteristic of both eras of construction.

4. Designer/Builder

Designer/Builder is good (VG). The A/B Wing was constructed by Edward W. Cannon, a Bay Area designer of tertiary importance, and the B/C Wing was constructed by the firm of Stone and Mulloy, Bay Area designers of secondary importance who became known for their hospital designs and designed approximately 20 hospitals and medical buildings in Northern California in the post-war era.

5. Style/Type

The A/B and B/C Wings together receive a rating of very good (VG) for style/type criterion. The A/B Wing embodies many early 20th century hospital design trends. The building is narrow and linear in form, to facilitate a “Nightingale ward” arrangement. The building is a good example of Northern Italian Renaissance style, clad in brick and terra cotta to fireproof the structure and prevent the spread of contagious disease. Oriented to the south to maximize its exposure to sunlight, the building includes solariums and a high number of windows to ensure light and airflow. The B/C Wing continues the layout and design of the A/B Wing, and was designed as part of a master plan

undertaken to expand the function but maintain the aesthetic of the existing A/B Wing. Modern style details at the B/C Wing reinterpret the Northern Italian Renaissance style in an updated but sensitive way.

B. History/Association

6. Person/Organization

The A/B and B/C Wings receive a rating of good (G) for this criterion, since the two wings together represent the expanding needs of the Children's Hospital after the hospital's primary period of significance. As such, they can be considered intimately connected to an organization of tertiary importance (prominent but not leading role) to the City's development.

7. Event

Research has uncovered no specific significant events that took place at the A/B and B/C Wings. Thus, the building receives a FP rating for this criterion.

8. Patterns

The A/B Wing and B/C Wing together receives a good (G) rating for this criterion. The A/B and B/C Wings are associated with improved healthcare for children and the need for larger facilities to serve Oakland's growing population after World War II. However, this population surge had an effect on the city's entire civic infrastructure, not specifically hospitals. The population increase could be considered a pattern of tertiary importance, garnering the A/B Wing and B/C Wing a rating of good for this criterion.

9. Age

The A/B Wing was constructed in 1926 and received a G rating, while the B/C Wing was constructed in 1946-1948 and as such receives an FP rating for this criterion. The associated numerical score for this criterion is averaged between the two (see Appendix).

10. Site

The A/B and B/C Wings have not been moved and as such receive a rating of excellent (E) for this criterion.

C. Context

11. Continuity

The A/B and B/C Wings are not located in an API or ASI, and therefore receive an FP rating for this criterion.

12. Familiarity

The A/B and B/C Wings receive an FP rating for this criterion, due to the way changes in the area have largely removed both wings from public view. Only the east façade of the A/B Wing is visible from the elevated Grove-Shafter Freeway. On the whole, however, the wings are no longer conspicuous or familiar within their surrounding context. The construction of the Ford Research and Diagnostic Center in 1962, the construction of the Grove/Shafter Freeway (State Route 24) in 1968,

the closure of 51st Street, the closure of public access to Dover Street south of 52nd Street, the construction of the West Site Plant in 1979, and the construction of the Patient Tower in 1982 have combined to severely alter and limit the A/B and B/C Wing's familiarity within the neighborhood.

D. Integrity

Ratings in this category are Excellent (E), Good (G), Fair (F), and Poor (P).

13. Condition

The A/B Wing and B/C Wing together receive a good (G) rating for condition, which is a measure of surface wear or structural problems to the building. The building exhibits only minor deterioration of this sort.

14. Exterior and Alterations

The A/B Wing and B/C Wing together have undergone a series of alterations. The A/B Wing receives a rating of good (G) while the B/C Wing receives a rating of fair (F). The associated numerical score for this criterion is averaged between the two ratings (see Appendix). Additions to the two wings include demolition of the main arched entry and replacement with a modern two-story entry in 1962; infill of some windows on the A/B Wing; and third story additions at the northern sections of both wings in ca. 1948, 1958, and ca. 1962. The construction of the West Site Plant in 1979 directly abutting the B/C Wing changed the western façade and required the blinding and the alteration of several window groups. The construction of the Patient Tower in 1982 directly abutting the B/C Wing completely obscured the building's original north façade. The enclosure of the B/C Wing's porch at the first story of the east façade in 1987 continued to alter the building's original design and also impaired its stylistic relationship with the A/B Wing, which retains its original first story porch. Many original features and materials are retained, however, particularly on the A/B Wing.

Conclusion

Page & Turnbull's intensive survey and evaluation assigns the A/B and B/C Wings as one building a rating of **C3**, signifying that the building is of secondary importance, not located in a district or area of importance.

D. THE BRUCE LYON MEMORIAL RESEARCH CENTER

The Oakland Cultural Heritage Survey has not assigned the Bruce Lyon Memorial Research Center a preliminary rating. A brief explanation of the evaluation, including each of the fourteen evaluative criteria, follows. Ratings for the categories of Architecture, History/Association, and Context below are: Excellent (E), Very Good (VG), Good (G), and Fair/Poor (FP).

A. Architecture

1. Exterior/Design

The Research Center shows good (G) quality of form and composition, with a clearly identifiable International style design influence at the first story, including ribbon windows, glass entry vestibule, cantilevered planes at the vestibule, minimal applied ornamentation, extensive use of glass, emphasis on horizontal planes, and stack bond brick cladding details. The incompatible second story addition reduces its ability to express its original design style.

2. Interior

The interior of the building was not evaluated for this report.

3. Construction

The building is a steel reinforced concrete building with brick cladding, characteristic of its era of construction, and therefore receives a rating of good (G) for this criterion.

4. Designer/Builder

The Research Center was designed by the firm Stone, Marraccini and Patterson, a later iteration of the firm Stone and Mulloy, which designed the B/C Wing. The firm specialized in hospital design and also designed the Ford Diagnostic and Treatment Center. The Bruce Lyon Center is a rather simple example of a medical building and compared to this building, there are likely better examples (with higher integrity) from their portfolio of work. Nevertheless, the firm's focus on hospital design and their prolific output qualifies the Research Center for a rating of very good (VG) for its association with this firm of secondary importance.

5. Style/Type

The Research Center receives a good (G) rating for this criterion as it is a good example of institutional International style design at the first story. The second story addition at the building reduces its ability to express its original design style.

B. History/Association

6. Person/Organization

The Research Center receives a rating of good (G) for this criterion for its association with the Children's Hospital and the Children's Hospital Oakland Research Institute (CHORI). Because most of CHORI's work at the Research Center occurred in recent decades (less than 50 years ago) and some of their greater medical successes occurred after the organization vacated the building, the Bruce Lyon Research Center can be considered loosely connected to an organization of secondary importance (major but not decisive role) to the City's development.

7. Event

Research has revealed no specific events that took place at the research Center that have made a significant contribution to the community. The research Center receives a rating of FP for this criterion.

8. Patterns

The Research Center receives a rating of good (G) for this criterion, as it is associated with a pattern of shifting hospital design and expansion during its era of construction. As hospitals began to include research in their programmatic needs, hospital design shifted to accommodate this need. The Research Center is the first building at the Children's Hospital site to reflect this new programmatic turn in hospital design.

9. Age

The building was constructed in 1958 and as such receives a rating of FP for this criterion.

10. Site

The building has not been moved and as such receives a rating of excellent (E) for this criterion.

C. Context

11. Continuity

The Research Center is not included in an API or ASI. As such, the building receives a rating of FP for this criterion.

12. Familiarity

The research Center receives an FP rating for this criterion, meaning that it is not particularly conspicuous or familiar within the surrounding neighborhood. This is due to changes in the area that have largely removed the building from public view. The original primary façade faces a busy highway interchange ramp and elevated BART tracks, which reduces its street visibility. The 1974 second story addition also limits visual access to the original 1958 building. Visual access to the building is further diminished by the placement of portable buildings directly to the north and the construction of the Research Center Addition directly to the south in 1992. Employee entrance to the building is now at the east façade, which is otherwise characterized by utility sheds and portable structures. These factors combine to lower the buildings' familiarity.

D. Integrity

Ratings in this category are Excellent (E), Good (G), Fair (F), and Poor (P).

13. Condition

The Research Center receives a good (G) rating for condition, which is a measure of surface wear or structural problems to the building. The building exhibits only minor deterioration of this sort.

14. Exterior and Alterations

The Research Center has undergone a series of alterations which lower its rating in this category to fair (F). The construction in 1974 of an addition at the second story dramatically changed the scale of the building and literally overshadows the original one-story building. This second story addition has little design relationship to the first story. The addition includes an entrance on the east façade which has supplanted the building's original entry vestibule at the west façade. Another addition constructed in 1992 to the south of the original building further altered the design and scale of the original building.

Conclusion

This evaluation assigns the Bruce Lyon Memorial Research Center a rating of **C3**, signifying that the building is of secondary importance not located in a district or area of importance.

E. THE FORD DIAGNOSTIC AND RESEARCH CENTER

The Oakland Cultural Heritage Survey has not assigned the Ford Diagnostic and Research Center a preliminary rating. A brief explanation of the evaluation, including each of the fourteen evaluative criteria, follows. Ratings for the categories of Architecture, History/Association, and Context below are: Excellent (E), Very Good (VG), Good (G), and Fair/Poor (FP).

A. Architecture

1. Exterior/Design

The Ford Center shows good (G) quality of form with identifiable International style influences including ribbon windows, full height glass entry bay, asymmetrical primary façade, emphasis on horizontal planes, and minimal ornamentation. The building does not feature much in the way of originality, artistic merit, craftsmanship, or sensitivity to surroundings, however.

2. Interior

The interior of the Ford Center includes a series of research offices and medical-use rooms with no notable architectural detail or association, and as such the building receives a rating of FP.

3. Construction

The construction materials or methods include steel frame concrete with brick cladding, characteristic of its era of construction and therefore receives a rating of good (G) for this criterion.

4. Designer/Builder

The Ford Center was designed by the firm Stone, Marraccini and Patterson, a later iteration of the firm Stone and Mulloy, which designed the B/C Wing and the Bruce Lyon Memorial Research Center. The firm’s focus was on hospital design and their output was prolific, however the Ford Center is a rather simple example of a medical building and compared to this building, there are likely better examples (with higher integrity) from their portfolio of work. Nevertheless, the firm’s focus on hospital design and their prolific output qualifies the Ford Center for a rating of very good (VG) for its association with this firm of secondary importance.

5. Style/Type

The Ford Center receives a good (G) rating for this criterion as it is a good example of institutional International style design at the first and second story, including ribbon windows, full height glass entry bay, asymmetrical primary façade, an emphasis on horizontal planes, and minimal applied ornament. The third story addition, constructed in 1974, reduces its ability to express its original design style.

B. History/Association

6. Person/Organization

The Ford Center receives a rating of good (G) for this criterion for its association with the Children’s Hospital. This building was constructed after the Hospital’s primary period of significance, and as such can be considered intimately connected to an organization of tertiary importance (prominent but not leading role) to the City’s development.

7. Event

Research has uncovered no significant event that has taken place at the Ford Center, and as such it receives a rating of FP for this criterion.

8. Patterns

The Ford Center receives a rating of good (G) for this criterion, as it is associated with a pattern of shifting hospital design and expansion during its era of construction. As hospitals began to include research in their programmatic needs, hospital design shifted to accommodate this need. The Ford Center joined the Bruce Lyon Memorial Research Center as the earliest buildings at the Children's Hospital site to reflect this new programmatic turn in hospital design.

9. Age

The Ford Center was constructed in 1962 and as such receives a rating of FP for this criterion.

10. Site

The building has not been moved and as such receives a rating of excellent (E) for this criterion.

C. Context

11. Continuity

The Ford Center is not included in an API or ASI. As such, the building receives a rating of FP for this criterion.

12. Familiarity

The Ford Center receives a rating of good (G) for this criterion as the oldest extant building at the Hospital with street façade that is currently prominent. The Ford Center qualifies as a familiar feature in the context of the Temescal neighborhood.

D. Integrity

Ratings in this category are Excellent (E), Good (G), Fair (F), and Poor (P).

13. Condition

The Ford Center receives a rating of good (G) for this criterion, which is a measure of surface wear or structural problems to the building. The building exhibits only minor deterioration of this sort.

14. Exterior and Alterations

The Ford Center has undergone a series of alterations which lower its rating in this category to fair (F). The construction in 1974 of an addition at the third story substantially changed the scale of the building and diminished the horizontality of the original building's International style design. The construction in 1982 of the Patient Tower obscured the building's west façade, and the construction in 1993 of the Cardiac Catheterization Lab obscured parts of the original entrance lobby and the south façade. Windows at the first story of the south façade have been blinded, and interior spatial

reconfigurations have made it so that the original entrance doors at the east façade are in use only as emergency exit doors.

Conclusion

This evaluation assigns the Ford Diagnostic and Research Center a rating of **C3**, indicating that it is a building of secondary importance, not located in a district or area of importance.

VIII. EVALUATION OF THE CHILDREN’S HOSPITAL COMPLEX AS A CITY OF OAKLAND LOCAL HISTORIC DISTRICT

The Historic Preservation Element of the City of Oakland General Plan describes two levels of Preservation Districts: Class 1 Preservation Districts are all Areas of Primary Importance (API) identified by the intensive survey and other areas that meet the “Guidelines for Determination of Preservation District Eligibility” and Class 2 Preservation Districts are all Areas of Secondary Importance (ASI) identified by the intensive survey and other areas that meet the “Guidelines for Determination of Preservation District Eligibility.”¹⁷⁶ Areas of Primary Importance are areas that have been identified by an intensive survey as having a high proportion of individual properties with ratings of “C” or higher. At least two-thirds of the properties within an API must be contributory to the API, i.e. they reflect the API’s principle historical or architectural themes. APIs appear eligible for the National Register of Historic Places either as districts or as historically related complexes. Areas of Secondary Importance are similar to Areas of Primary Importance except that (a) an ASI does not appear eligible for the National Register and (b) altered properties which do not now contribute to the ASI but would if restored are counted as contributors for purposes of the two-thirds threshold.

The Children’s Hospital complex does not appear eligible for listing as a City of Oakland Designated Historic District, either as an API or an ASI. Only four of the twelve buildings at the Hospital complex are older than 45 years old, which is below the two-thirds threshold established in the Preservation Element. The A/B Wing (Baby Hospital) received a score of **B3** (major importance) while the other three buildings received ratings of **C3**, indicating that they are buildings of secondary importance. They do not illustrate a unified significant architectural or historical theme. Therefore, the Children’s Hospital complex does not qualify as a City of Oakland Local Historic District.

¹⁷⁶ Oakland General Plan, Historic Preservation Element, Chapter 4: Preservation Incentives and Regulations, Policy 2.2: Landmark and Preservation District Eligibility Criteria.

IX. STATUS OF CHILDREN'S HOSPITAL BUILDINGS AS HISTORICAL RESOURCES UNDER CEQA

A building may qualify as a historical resource if it falls within at least one of five categories established by the City of Oakland (See page 9-10 for the list of categories). The following describes the status of the hospital buildings as historic resources for the purposes of CEQA, based on the California Register and City of Oakland Designated Historic Property evaluations in the previous sections.

Status of the A/B Wing (Baby Hospital) as a Historical Resource Under CEQA

Based on our analysis, the A/B Wing (Baby Hospital) is not eligible for listing in the California Register, though it is eligible for listing as a City of Oakland Designated Historic Property. Therefore, the A/B Wing (Baby Hospital) qualifies as a historical resource under CEQA.

Status of the B/C Wing as a Historical Resource Under CEQA

Based on our analysis, the B/C Wing is not eligible for listing in the California Register or as a City of Oakland Designated Historic Property. Therefore, it does not qualify as a historical resource under CEQA.

Status of the A/B Wing and B/C Wing as a Historical Resource Under CEQA

Based on our analysis, the A/B Wing and B/C Wing, considered together as one building, are not eligible for listing in the California Register or as a City of Oakland Designated Historic Property. Therefore, they do not qualify together as a historical resource under CEQA.

Status of the Bruce Lyon Memorial Research Center as a Historical Resource Under CEQA

Based on our analysis, the Bruce Lyon Memorial Research Center is not eligible for listing in the California Register or as a City of Oakland Designated Historic Property, and, therefore, does not qualify as a historical resource under CEQA.

Status of the Ford Diagnostic and Research Center as a Historical Resource Under CEQA

Based on our analysis, the Ford Diagnostic and Research Center is not eligible for listing in the California Register or as a City of Oakland Designated Historic Property, and, therefore, does not qualify as a historical resource under CEQA.

Status of Other Buildings on the Main Hospital Site

The other properties in the hospital complex are less than forty-five years old and do not possess a level of significance that would qualify them for listing as historic resources under CEQA. These buildings include the Cardiac Catheterization Lab, Central Plant/West Site Plant, Patient Tower, Cafeteria, Helistop, Outpatient Center, and parking garage.

Status of the Children’s Hospital and Research Center as a Historic District Under CEQA

Based on our analysis, the Oakland Children’s Hospital and Research Center is not eligible for listing in the California Register or as a City of Oakland Designated Historic Property, and, therefore, does not qualify as a historical resource under CEQA.

X. A/B WING (BABY HOSPITAL) CHARACTER-DEFINING FEATURES DIAGRAMS

Though the A/B Wing (Baby Hospital) was not found eligible for listing in the California Register due to a loss of integrity, it was found eligible for listing as a City of Oakland Designated Historic Property with a rating of **B3**. This section addresses the character-defining features of the building and presents diagrams which show areas of character-defining and non-contributing features.

CHARACTER DEFINING FEATURES OF THE A/B WING (BABY HOSPITAL)

The A/B Wing (Baby Hospital) retains certain elements of its design and materials that can be described as character defining features. These include:

- The building's footprint; its narrow linear form and its southern orientation reflect the era of the building's construction and its status when built as a modern hospital.
- The ratio of solid to void; the building's evenly spaced smaller windows are characteristic of the Northern Italian Renaissance style in which it was designed.
- Brick and terra cotta cladding; this cladding is original to the building's design and construction, and is representative both of its Northern Italian Renaissance design style and the programmatic sanitation and fire-safety requirements of the Baby Hospital.
- Two two-story five-sided bays; these bays were used as solariums during an era when sunlight was believed to have healing qualities and are character defining for their programmatic use.
- Original windows of the primary type and surrounds: the building retains most of its original windows within original window surrounds—paired two-over-two, double-hung, wood-sash windows with multi-light awning transoms and brick lintels—which are representative of the building's era of construction.
- Ornamentation and architectural detail: the building is distinguished by its high level of design detail, including fluted columns with capitals that feature acanthus leaves, urns, fleur-de-lis, cherub's heads, and griffins, molded frieze depicting animal and bird motifs, bambino medallion, and a terra cotta balcony supported by ornamented brackets with floral and acanthus-leaf motifs.

The character-defining features represented in the following diagrams (colored red) consist of original features and materials, described above. Non-contributing features are those that have been modified, replaced, or added since the A/B Wing (Baby Hospital)'s period of significance (1926).

Children's Hospital - A/B Wing
CHARACTER-DEFINING FEATURES DIAGRAM

South (End Solarium) Elevation



LEGEND

	Character-Defining
	Non-Contributing

Children's Hospital - A/B Wing
CHARACTER-DEFINING FEATURES DIAGRAM

South (Entrance Facade) Elevation



LEGEND

	Character-Defining
	Non-Contributing

Children's Hospital - A/B Wing
CHARACTER-DEFINING FEATURES DIAGRAM

West Elevation



LEGEND

	Character-Defining
	Non-Contributing

Children's Hospital - A/B Wing
CHARACTER DEFINING FEATURES DIAGRAM

East Elevation



LEGEND

	Character-Defining
	Non-Contributing

Children's Hospital - A/B Wing
CHARACTER DEFINING FEATURES DIAGRAM

North Elevation



LEGEND

	Character-Defining
	Non-Contributing

XI. RESIDENTIAL/COMMERCIAL PROPERTIES EVALUATION

This section provides an inventory of the fourteen residential, mixed-use, and commercial properties within the study area (See **Figure 2** on page 18). Included as part of this inventory are an architectural description, building history, current historic status, and an evaluation of eligibility for inclusion in the California Register of Historical Resources and designation as a City of Oakland Designated Historic Property. A description of the 55th and Dover Residential District is also included.

A. 55TH AND DOVER RESIDENTIAL DISTRICT

The 55th and Dover Residential District is a residential neighborhood in North Oakland bounded by 52nd and 55th streets to the south and north, Martin Luther King Jr. Way to the west, and the Grove-Shafter Freeway (State Route 24) to the east. The predominant architectural styles are Craftsman and Colonial Revival. Most buildings in the district are wood frame, one-and-a-half- to two-story residences clad in wood clapboard siding, wood shingles, or stucco. The residences are sited on fairly uniformly-sized lots and display regular setbacks from the street and spacing between buildings. Most buildings were built between 1900 and 1920, according to Oakland Cultural Heritage Survey (OCHS) estimates.

The area was surveyed by the OCHS in 1996 and assigned a rating of Area of Secondary Importance (ASI). As an ASI, at least two-thirds of the properties within its boundaries must have an existing or contingency rating of C or above and be rated as contributors (noted by “+”). The 55th and Dover Residential District is not a designated historic district at present, but the ASI rating is taken into account by city planners when projects are proposed within the district. According to the City Of Oakland’s General Plan, ASIs (and their contributors) are not considered historical resources for the purposes of CEQA.

Page & Turnbull was not asked to complete a residential district evaluation for either the state or local registers as part of the scope of work for this project. However, such an evaluation is necessary to fully understand the existing conditions, historic context, and integrity of the district. Based on its current status as an ASI and reconnaissance surveys and research on the subject properties, the district does not appear to have sufficiently cohesive historical or visual themes such that it would be eligible for listing in the California Register. Therefore, it does not appear to be a historic resource under CEQA.

B. 682 52ND STREET



Figure 56. 682 52nd Street, looking north.
Source: Page & Turnbull, April 2008.

Description

Built in 1922, 682 52nd Street is a one-story, wood-frame, single-family residence designed in the Craftsman style (**Figure 56**). The rectangular-plan building is clad in stucco on the primary façade and wood clapboard siding on the secondary façades. It is capped by a cross-gable roof clad in asphalt shingles. The foundation is not visible. The primary façade faces south. Typical fenestration consists of fixed wood-sash windows, sliding vinyl-sash windows, and wood-sash casement windows. The primary entrance features a flush wood door. Architectural and site details include concrete stairs, molded window surrounds, a metal window awning, simple wood eave brackets, and a stuccoed chimney. The building appears to be in good condition. A concrete driveway runs past the west side of the house. A one-story garage is shown at the rear of the building on Sanborn Fire Insurance Maps dating to 1930, though today there appears to be a smaller shed at the rear of the lot.

Historic Context

Emma M. Williams owned two vacant lots on Dover Street from ca. 1905 until 1922.¹⁷⁷ The 1920 Census indicates that Williams lived on 23rd Street in Oakland.¹⁷⁸ By 1922, the lots were divided, reoriented to front on 52nd Street, and the eastern lot was sold to John Andrews.¹⁷⁹

In 1922, Andrews commissioned builder R. L. Robins to build a house at 682 52nd Street for \$3,000.¹⁸⁰ John Andrews was born ca. 1874 in Lithuania and married Ursula, another Lithuanian

¹⁷⁷ 1900, 1905, 1921, 1923 Block Books.

¹⁷⁸ 1920 Census.

¹⁷⁹ 1923 Block Book.

immigrant, one year after he arrived in the United States in 1903.¹⁸¹ The Andrews had two daughters, Violet and Clara, who were born in California. In 1930, Andrews worked as a machinist and Clara worked as a telephone operator. At that time, the house was valued at \$5,500. John Andrews continued to reside at 682 52nd Street through 1940, though he is listed as a widower in the 1940 Census. It is likely he sold the property soon after Ursula's death. By 1967, the property was under the possession of Jewel Edward Brown. Mr. Brown was born in 1912 in Louisiana. He moved to Oakland during the 1930s and worked as a porter.¹⁸² He stayed at 682 52nd Street until his death in 1990.¹⁸³

The builder of 682 52nd Street was Rockford L. Robins, a contractor who lived on Broadway in North Oakland.

Current Historic Status

682 52nd Street has an Oakland Cultural Heritage Survey (OCHS) rating of D2+, indicating that it is a building of secondary importance that contributes to the 55th and Dover Residential District, an Area of Secondary Important (ASI). Buildings that contribute to ASIs are Potentially Designated Historic Properties, or PDHPs. This rating for 682 52nd Street is shown on the Citywide Preliminary Historical and Architectural Inventory field map, though it is not included in the 55th and Dover Residential District's Preliminary Property List attached to the 1996 District Primary Record.

Evaluation for the California Register

682 52nd Street does not appear to be significant under any California Register criteria. It is not directly associated with important broader development trends or other events in the Temescal neighborhood (Criterion 1), nor is it associated with persons significant within a local, state, or national context (Criterion 2). Owners and occupants were working class people and little information was found on them in local and online archives that would indicate any level of significant contributions. The building is also not significant for its architecture because it is a simple Craftsman style building without high artistic values that was constructed by a little-known builder (Criterion 3).¹⁸⁴

682 52nd Street retains integrity of location and feeling as a 1920s residence. While the building appears to have been altered with the addition of stucco cladding, some replacement windows, and conversion to office use, it retains some degree of integrity of design, materials, and workmanship. It lacks integrity of setting, due to the adjacent highway and large modern hospital development across the street. Since the building has been converted to offices and does not retain its original function, it lacks integrity of association.

¹⁸⁰ Building Permit #68273, 14 April 1922.

¹⁸¹ 1930 United States Federal Census.

¹⁸² 1940 Census.

¹⁸³ U.S., *Social Security Death Index, 1935-Current* [database on-line]. Provo, UT, USA: Ancestry.com Operations Inc, 2011.

¹⁸⁴ 682 52nd Street was not evaluated for eligibility under Criterion 4, which is beyond the scope of this report since "potential to yield information important to the prehistory or history of California" typically relates to archeological resources, rather than built resources.

Evaluation for Designation as a City of Oakland Designated Historic Property

Page & Turnbull’s survey and evaluation assigns this building a rating of **C2+**, meaning that it is a building of secondary importance, located in a the 55th and Dover Residential District (an ASI), and acts as a contributor to that district. Evaluative considerations for each of the fourteen criteria are included on the Evaluation Worksheet for this building found in the Appendix.

682 52nd Street as a Historical Resource Under CEQA

682 52nd Street is not eligible for listing in the California Register and received a “C” rating based on City of Oakland Designated Historic Property evaluation criteria. Therefore, 682 52nd Street does not appear to be a historic resource under CEQA.

C. 688 52ND STREET



Figure 57. 688 52nd Street, looking north.
Source: Page & Turnbull, April 2008.

Description

Built in 1922, 688 52nd Street is a one-story, wood-frame, single-family residence designed in the Craftsman style (**Figure 57**). The rectangular-plan building, clad in smooth stucco, is capped by a gable roof covered with asphalt shingles. The foundation is not visible. The primary façade faces south. Typical fenestration consists of fixed and double-hung vinyl-sash windows and fixed wood-sash windows. The primary entrance features a flush wood door. Architectural and site features include concrete stairs, an entry porch, molded window surrounds, metal window awnings, simple wood eave brackets, and a chimney with a molded crown. The building appears to be in good condition. A garage clad in channel drop wood siding sits behind the building and fronts onto Dover Street. This garage is shown on Sanborn Fire Insurance Maps dating from 1930.

Historic Context

Emma M. Williams owned two vacant lots facing onto Dover Street from ca. 1905 until 1922.¹⁸⁵ The 1920 Census indicates that Williams lived on 23rd Street in Oakland.¹⁸⁶ By 1922, the lots were divided, reoriented to front onto 52nd Street, and the western lot was sold to A. A. Moore.¹⁸⁷

In 1922, Arthur A. Moore commissioned builder M. Bensen to build a house at 688 52nd Street at a cost of \$3,800.¹⁸⁸ The 1920 Census indicates that Moore lived with his parents at 478 Roca Street in Oakland.¹⁸⁹ Both Arthur and his father, Alexander, worked as lathers in the construction industry.

¹⁸⁵ 1900, 1905, 1921, 1923 Block Books.

¹⁸⁶ 1920 Census.

¹⁸⁷ 1923 Block Book.

¹⁸⁸ Building Permit #71876, 1 September 1922.

¹⁸⁹ 1920 Census.

Two years after their marriage, Arthur and Elsie Moore bought the property at 688 52nd Street.¹⁹⁰ By 1930, four people lived at 688 52nd Street: Arthur and Elsie, their young daughter Muriel, and Arthur’s widowed father. At that time the house was valued at \$6,000.¹⁹¹ Sometime during the following decade, the Moore family relocated to a different house in the district. O.J. Rollie was residing at 688 52nd Street by 1969 and continued to own the property until his death in 1991.¹⁹² Rollie was born in Texas in 1912. He and his wife moved to Oakland after they were married in 1937.

The builder of 688 52nd Street, Martin Bensen, was born ca. 1885 in Sweden. He immigrated to the United States in 1903 and was naturalized in 1912. In 1920, he worked as a carpenter and rented a house with his wife, Jennie, and three children in Oakland’s Fruitvale district.¹⁹³

Current Historic Status

688 52nd Street has an Oakland Cultural Heritage Survey (OCHS) rating of D2+, indicating that it is a building of secondary importance that contributes to the 55th and Dover Residential District, an Area of Secondary Importance (ASI). Buildings that contribute to ASIs are Potentially Designated Historic Properties, or PDHPs. This rating for 688 52nd Street is shown on the Citywide Preliminary Historical and Architectural Inventory field map, though it is not included in the 55th and Dover Residential District’s Preliminary Property List attached to the 1996 District Primary Record.

Evaluation for the California Register

688 52nd Street does not appear to be significant under any California Register criteria. It is not directly associated with important broader development trends or other specific events in the Temescal neighborhood (Criterion 1), nor is it associated with persons significant within a local, state, or national context (Criterion 2). Owners and occupants were working class people and little information was found on them in local and online archives that would indicate any level of significant contributions. The building is also not significant for its architecture because it is a simple Craftsman style building without high artistic values and was constructed by a little-known builder (Criterion 3).¹⁹⁴

688 52nd Street retains integrity of location, design, and feeling as a 1920s residence. While the building appears to have been altered with the addition of stucco cladding and some replacement windows, it retains some degree of integrity of materials and workmanship. It lacks integrity of setting, due to the adjacent highway and large modern hospital development across the street. As no important historic event or person is associated with the property, it lacks integrity of association.

¹⁹⁰ 1930 Census.

¹⁹¹ Ibid.

¹⁹² U.S., *Social Security Death Index, 1935-Current* [database on-line]. Provo, UT, USA: Ancestry.com Operations Inc, 2011.

¹⁹³ 1920 Census.

¹⁹⁴ 688 52nd Street was not evaluated for eligibility under Criterion 4, which is beyond the scope of this report since “potential to yield information important to the prehistory or history of California” typically relates to archeological resources, rather than built resources.

Evaluation for Designation as a City of Oakland Designated Historic Property

Page & Turnbull’s survey and evaluation assigns this building a rating of **C2+**, meaning that it is a building of secondary importance, located in the 55th and Dover Residential District (and ASI) and acts as a contributor to that district. Evaluative considerations for each of the fourteen criteria are included on the Evaluation Worksheet for this building found in the Appendix.

688 52nd Street as a Historical Resource Under CEQA

688 52nd Street is not eligible for listing in the California Register and received a “C” rating based on City of Oakland Designated Historic Property evaluation criteria. Therefore, 688 52nd Street does not appear to be a historic resource under CEQA.

D. 720 52ND STREET



Figure 58. 720 52nd Street, looking north.
Source: Page & Turnbull, May 2013.

Description

Built in 1907, 720 52nd Street is a one-story, wood-frame, single-family residence designed in a modified Simple Bungalow style (**Figure 58**). The rectangular-plan building, clad in wood clapboard siding, is capped by a hip roof covered with asphalt shingles. A wide square bay window is located on the front façade and is surmounted by a gable end clad in wood shingles. The foundation is not visible. The primary façade faces south. Typical fenestration consists of double-hung vinyl-sash windows, some set in angled window bays. The primary entrance is covered by a metal security gate. Architectural and site features include concrete stairs, a recessed corner entry porch supported by a square post, molded wood window surrounds, and a brick chimney. The building appears to be in good condition.

Historic Context

In 1905, J. C. Rudolph owned most of the south side of the block bounded by 52nd, 53rd, Grove, and Dover streets. Rudolph lived at 5203 Dover Street (see *D. 5203 Dover Street*). In 1907, builder W. H. Keifer purchased 5203 Dover Street and the vacant lot on 52nd Street, where he built the subject property at 720 52nd Street that year.¹⁹⁵ Architect Thomas D. Newsom designed the residence, which was constructed by the lot owner, Keifer. Keifer sold the property to Jennie M. Sessions in 1908.

Architect Thomas Dean Newsom was born ca. 1857 to Scottish and Irish parents who had immigrated to Canada.¹⁹⁶ He married his wife, Kittie, ca. 1885, and they had four children in California. By 1889, Thomas established an architecture office under the business name John J. & T.

¹⁹⁵ 1907 Block Book.

¹⁹⁶ 1910 Census.

D. Newsom.¹⁹⁷ The Newsoms lived in East Oakland. The architectural office was located in San Francisco at 504 Kearny in 1891, but it moved to downtown Oakland by 1900.¹⁹⁸ In 1908, Newsom designed a two-story apartment building in Oakland for William F. Schroeder, a local building contractor.¹⁹⁹ Before construction, the building was touted as “one of the most novel ever built in Oakland” for its massing, which referenced that of the Egyptian pyramids.²⁰⁰

William Hammond Keifer, the owner and builder of 720 52nd Street, was born in 1857 in Pennsylvania and lived with his wife, Elizabeth, three children, his father, and his sister in Oakland in 1900.²⁰¹ Elizabeth died between 1900 and 1910, and Keifer and his youngest child moved in with his sister and brother-in-law in Oakland by 1910. At that time Keifer, a carpenter by trade, was the vice president of Oakland Builders Supply.²⁰² Most likely, Keifer built the house on speculation and never occupied it, as he sold the property to Jennie M. Sessions in 1908.²⁰³ No information was found on Sessions at local repositories or in online census databases.

In 1920, Herman Garloff rented 720 52nd Street.²⁰⁴ He lived there with his wife Mamie, sister-in law Lizzie Salmina, and two brothers-in-law, George and Albert Salmina. Herman worked as a shipfitter, George worked as a dairy farmer, and Albert was employed with a railroad company as a pipe fitter. The Salminas were born in California to Swiss-Italian and English immigrant parents.

E. W. Roberts (or Ernest H. Roberts) purchased the house ca. 1922.²⁰⁵ In 1930, 40-year-old Roberts still lived in the house with his wife Selina and their son Ernest.²⁰⁶ Ernest worked as a bookkeeper, probably for a cannery. In 1940, Roberts still lived in the house with his wife and son.²⁰⁷ By 1967, Graham McClendon was residing at 750 52nd Street McClendon, a former farmer born in Mississippi ca. 1923, moved to Oakland after serving in World War II.

Current Historic Status

720 52nd Street has an Oakland Cultural Heritage Survey (OCHS) rating of D2+, indicating that the building is of minor importance. It is a contributor to the 55th and Dover Residential District, an Area of Secondary Importance (ASI). Buildings that contribute to ASIs are Potentially Designated Historic Properties, or PDHPs.²⁰⁸

Evaluation for the California Register

720 52nd Street does not appear to be significant under any California Register criteria. It is not directly associated with important broader development trends or other specific events in the Temescal neighborhood (Criterion 1), nor is it associated with persons significant within a local,

¹⁹⁷ 1889-91 San Francisco City Directory.

¹⁹⁸ Ibid.; *Oakland Tribune*, 3 May 1908, 58.

¹⁹⁹ Ibid.; 1910 Census.

²⁰⁰ *Oakland Tribune*, 3 May 1908, 58.

²⁰¹ 1900 Census.

²⁰² 1910 Census; Oakland City Directory, 1910.

²⁰³ 1908 Block Book.

²⁰⁴ 1920 Census.

²⁰⁵ 1921, 1923 Block Books.

²⁰⁶ 1930 Census.

²⁰⁷ 1940 Census

²⁰⁸ “City of Oakland Historic Preservation Programs.”

state, or national context (Criterion 2). Owners and occupants were working class people and little information was found on them in local and online archives that would indicate any level of significant contributions. The building is also not significant for its architecture because it is a Simple Bungalow style building without high artistic values. It was constructed by a local architect who today is not widely known and cannot be considered a master architect (Criterion 3).²⁰⁹

720 52nd Street retains integrity of location, design, workmanship, association, and feeling as an early 20th-century residence. While the building appears to have been altered with replacement windows, it retains some degree of integrity of materials. It lacks integrity of setting, due to an adjacent large modern Children’s Hospital Outpatient Building, the large modern hospital complex across the street, and the nearby highway. The property also lacks integrity of association, as the nearby modern buildings visually overshadow the property and physically separate it from its historic association with much of the adjacent residential neighborhood.

Evaluation for Designation as a City of Oakland Designated Historic Property

Page & Turnbull’s intensive survey and evaluation assigns this building a rating of **C2+**, meaning that it is a building of secondary importance, located in an ASI district, and acts as a contributor to that district. Evaluative considerations for each of the fourteen criteria are included on the Evaluation Worksheet for this building found in the Appendix.

720 52nd Street as a Historical Resource Under CEQA

720 52nd Street is not eligible for listing in the California Register and received a “C” rating based on City of Oakland Designated Historic Property evaluation criteria. Therefore, 720 52nd Street does not appear to be a historic resource under CEQA.

²⁰⁹ 720 52nd Street was not evaluated for eligibility under Criterion 4, which is beyond the scope of this report since “potential to yield information important to the prehistory or history of California” typically relates to archeological resources, rather than built resources.

E. 5203 DOVER STREET



Figure 59. 5203 Dover Street, looking west.
Source: Page & Turnbull, April 2008.

Description

Built ca. 1905, 5203 Dover Street is a one-story, wood-frame, single-family residence designed in the Simple Bungalow style with Classical Revival detail (**Figure 59**). The rectangular-plan building, clad in wood channel-drop and clapboard siding, is capped by a hip roof covered with asphalt shingles. A front-facing gable end is clad in wood shingles and features a multi-light wood-sash window. A side-facing dormer holds a multi-light wood-sash window. The foundation is not visible. The primary façade faces east. Typical fenestration consists of double-hung and fixed wood-sash windows, some set in angled and square window bays. The primary entrance features a partially-glazed wood door. Architectural and site features include wood stairs, an entry porch with Classical columns, molded wood window surrounds, a hip-roof dormer, and a brick chimney. The building appears to be in good condition.

Historic Context

In 1905, J. C. Rudolph owned most of the south side of the block bounded by 52nd, 53rd, Grove, and Dover streets. He lived at 5203 Dover Street in a house built ca. 1905.²¹⁰ 5203 Dover Street and the vacant property to the west at 720 52nd Street were sold to W. H. Keifer ca. 1907. The builder of 5203 Dover Street is unknown.

Emma C. Krone bought the house and property at 5203 Dover Street from Keifer ca. 1908. It is unclear whether she ever lived on the property: In 1910 she lived on Oak Grove Avenue with her

²¹⁰ 1900, 1905 Block Books.

young son and daughter and a 42-year-old boarder, Howard W. Caldwell.²¹¹ Krone, a 33-year-old divorcee, worked as a secretary at a land company in 1910.

Krone sold the property at 5203 Dover Street to Walter B. and Mertie F. Hutchings (or Hutshing) in 1910.²¹² Walter B. Hutchings was 30 years old, and his wife Mertie was 26. They had been married for one year. Hutchings lived off his “own income.”²¹³ By 1912, ownership of the property was transferred to Mertie F. Hutchings.²¹⁴ In 1915, Mertie F. Butler owned the house, indicating that Mertie and Walter Hutchings separated either through death or divorce, and Mertie remarried Frank Butler. In 1920, Frank, Mertie, and three daughters under 10 years old occupied the house.²¹⁵ Frank worked as an accountant at an automobile company.

In 1930, Louise A. Searper, age 44, rented the house for \$35 per month. Searper lived with her sons Charles S. and Leslie L. White; William B. Butler, a boarder from Hawaii; and an uncle and aunt, Bruce and Edith Gibson. Searper was divorced and worked as a saleslady at a department store. Charles White worked as a restaurant cook, Leslie White worked as a marine engineer, William Butler worked as a city health inspector, and the Gibsons were unemployed or retired. Searper is not recorded in the 1940 Census. By 1967, Rosemon (or Roseman) Willis was residing at 5203 Dover Street. Willis was born in Mississippi in 1913 and died in 1991.²¹⁶ He lived with his wife, Mary.

Current Historic Status

5203 Dover Street has an Oakland Cultural Heritage Survey (OCHS) rating of D2+, indicating that the building is of minor importance. It is a contributor to the 55th and Dover Residential District, an Area of Secondary Importance (ASI). Buildings that contribute to ASIs are considered Potential Designated Historic Properties, or PDHPs.²¹⁷

Evaluation for the California Register

5203 Dover Street does not appear to be significant under any California Register criteria. It is not directly associated with important broader development trends or other specific events in the Temescal neighborhood (Criterion 1), nor is it associated with persons significant within a local, state, or national context (Criterion 2). Owners and occupants were working class people and little information was found on them in local and online archives that would indicate any level of significant contributions. The building is also not significant for its architecture because it is a Simple Bungalow style building with a minor amount of Classical Revival detail, and does not possess high artistic values. The architect or builder are unknown and cannot be considered a master architect (Criterion 3).²¹⁸

²¹¹ 1930 Census.

²¹² 1910 Census.

²¹³ Ibid.

²¹⁴ 1912 Block Book.

²¹⁵ 1920 Census.

²¹⁶ U.S., *Social Security Death Index, 1935-Current* [database on-line]. Provo, UT, USA: Ancestry.com Operations Inc, 2011.

²¹⁷ “City of Oakland Historic Preservation Programs.”

²¹⁸ 5203 Dover Street was not evaluated for eligibility under Criterion 4, which is beyond the scope of this report since “potential to yield information important to the prehistory or history of California” typically relates to archeological resources, rather than built resources.

5203 Dover Street retains integrity of location, design, workmanship, materials, and feeling as an early 20th-century residence. It lacks integrity of setting, due to the nearby large Children’s Hospital Outpatient Center, the large modern hospital complex across the street, and the nearby Grove-Shafter Freeway. The building also lacks integrity of association because it is use as offices and is no longer associated with its original function as a residence.

Evaluation for Designation as a City of Oakland Designated Historic Property

Page & Turnbull’s survey and evaluation assigns this building a rating of **C2+**, meaning that it is a building of secondary importance, located in an ASI district and is recorded as a contributor to that district. Evaluative considerations for each of the fourteen criteria are included on the Evaluation Worksheet for this building found in the Appendix.

5203 Dover Street as a Historical Resource Under CEQA

5203 Dover Street is not eligible for listing in the California Register and received a “C” rating based on City of Oakland Designated Historic Property evaluation criteria. Therefore, 5203 Dover Street does not appear to be a historic resource under CEQA.

F. 5212-5214 DOVER STREET



Figure 60. 5212-5214 Dover Street, looking north.
Source: Page & Turnbull, May 2013.

Description

Built in 1910, 5212-5214 Dover Street is a two-story, wood-frame, multi-family residence that has been altered from its original style (**Figure 60**). The rectangular-plan building is clad in wood clapboard siding on the primary façade and stucco on the secondary façades. It is capped by a flat roof. The foundation is concrete. The primary façade faces west. Typical fenestration consists of sliding vinyl-sash windows and fixed and double-hung wood-sash windows. The primary entrance features a flush wood door with sidelights. Architectural and site features include concrete stairs, a porch with tapered columns, and pent roofs above the first and second stories. The building appears to be in good condition.

Historic Context

Harry M. Swalley, a contractor and house carpenter, bought the vacant lot at 5214 Dover Street ca. 1907 and constructed a house on it in 1910.²¹⁹ In 1912, a rear structure was built on the property.²²⁰ A second rear structure was constructed before 1930.²²¹

Harry Swalley was born ca. 1874 in Missouri and married his wife, Emma, around 1905.²²² Their son Leavitt was born ca. 1909.²²³ From 1908-09, Swalley also owned a nearby property at 5325 Dover Street.²²⁴ The Swalleys had moved near Oakland’s Lake Merritt by 1916, and in 1920 Harry was working as a concessionaire at an amusement park.²²⁵

²¹⁹ 1907 Block Book; Building Permit #12305, 1908.

²²⁰ 1912 Block Book.

²²¹ 1930 Sanborn Fire Insurance Map.

²²² 1910 Census.

²²³ *Ibid.*

²²⁴ 1908, 1909 Block Books.

²²⁵ California Voter Registrations 1900-1968, Alameda County; 1920 Census.

Edward S. Howland, a guard at a government shipyard, bought the property at 5212-14 Dover ca. 1915.²²⁶ Howland, born ca. 1872, was married to Johanna and they had two daughters.²²⁷ By 1920, one daughter, Matie, and her husband Albert E. Swan, also lived at 5214 Dover, along with Johanna’s father, Charles T. Grimme. Albert Swan and Emma Howland both worked at a retail meat market.

Clyde A. Crosswell bought the property at 5212-14 Dover ca. 1922.²²⁸ By 1930, the house was valued at \$7,500 and included a unit rented for \$35 per month. Clyde Crosswell, age 33, lived at 5214 Dover with his wife, E. Glo, and mother-in-law, Margaret E. Shinkle.²²⁹ Clyde worked as an inspector with the police department, and his wife was associated with detective work. The rental unit at 5212 Dover Street was occupied by Clyde’s father, Jesse B. Crosswell, his wife Isabella, and their teenage daughters. Jesse Crosswell worked as an electrician. During the 1960s, Frank A. Boykin took over ownership of the property. Boykin was employed as a bus driver and lived at 5212 Dover Street with his wife Jewel. According to Oakland city phone directories, Jewel continued to reside at the property until 2002.

Between 1930 and 1952, a rear addition was constructed.²³⁰ A second one-story structure was built at the rear of the property ca. 1968.²³¹ The front porch was added after 1969.

Current Historic Status

5212-5214 Dover Street has an Oakland Cultural Heritage Survey rating of Dc2+, indicating that it is a building of minor importance located in the 55th and Dover Residential District, an Area of Secondary Importance (ASI), and contributes to that district. Its contingency rating of “c” indicates that the building rating may be upgraded in the future if inappropriate alterations are reversed.

Evaluation for the California Register

5212-5214 Dover Street does not appear to be significant under any California Register criteria. It is not directly associated with important broader development trends or other specific events in the Temescal neighborhood (Criterion 1), nor is it associated with persons significant within a local, state, or national context (Criterion 2). Owners and occupants were working- and middle-class people and little information was found on them in local and online archives that would indicate any level of significant contributions. The building is also not significant for its architecture because it is an altered Craftsman style building and does not possess high artistic values. The builder, Harry M. Swalley, is not well-known and cannot be considered a master architect (Criterion 3).²³²

5212-5214 Dover Street retains integrity of location. The building appears to have been altered with replacement windows, a porch addition, rear addition, and replacement cladding, which compromises

²²⁶ Ibid.; 1915 Block Book.

²²⁷ 1920 Census.

²²⁸ 1921, 1923 Block Books.

²²⁹ 1930 Census.

²³⁰ 1930, 1952 Sanborn Fire Insurance Maps.

²³¹ 1967, 1969 Sanborn Fire Insurance Maps.

²³² 5212-14 Dover Street was not evaluated for eligibility under Criterion 4, which is beyond the scope of this report since “potential to yield information important to the prehistory or history of California” typically relates to archeological resources, rather than built resources.

integrity of materials, design, workmanship, and feeling as an early 20th-century residence. It retains some degree of integrity of residential setting, though a large modern apartment building was constructed on the property to the north. As no important historic event or person is associated with the property, it lacks integrity of association.

Evaluation for Designation as a City of Oakland Designated Historic Property

Page & Turnbull’s intensive survey and evaluation assigns this building a rating of **D2+**, meaning that it is a building of secondary importance, located in an ASI district and is recorded as a contributor to that district. Evaluative considerations for each of the fourteen criteria are included on the Evaluation Worksheet for this building found in the Appendix.

5212-5214 Dover Street as a Historical Resource Under CEQA

5212-5214 Dover Street is not eligible for listing in the California Register and received a “D” rating based on City of Oakland Designated Historic Property evaluation criteria. Therefore, 5212-5214 Dover Street does not appear to be a historic resource under CEQA.

G. 5225 DOVER STREET



Figure 61. 5225 Dover Street, looking west. Source: Page & Turnbull, May 2013.

Description

Constructed in 1908, 5225 Dover Street is a two story over exposed basement, rectangular plan, Craftsman-style residence clad in asbestos shingle siding and capped with a double cross-gable roof (Figure 61). A concrete foundation is visible at the base of the building. The primary façade faces east. The primary entrance is located at the east façade and features a flush wood door sheltered by a shed roof and accessed via a brick stair and a concrete porch. Fenestration is a mix of double-hung and casement wood sash at the first and second stories; all windows have security bars at the first story. The north façade includes an enclosed porch at the first story with Craftsman-style corner posts, and two large dormers at the second story. The south façade includes an additional entrance, a flush wood door accessed by a short wood stair and sheltered by a front-gable porch. Second story gable ends have lattice vents at the peak and are supported by simple wood brackets. The building appears to be in fair condition, as alterations to the cladding are visible and some windows are damaged.

Historic Context

Harry M. Swalley, a contractor and house carpenter, bought the vacant lot at 5225 Dover Street ca. 1907 from Anna Kaufner and in 1908 received a permit for the construction of a two-story house.²³³ Swalley also owned property and built houses at 5212-5214 Dover Street and 5325 Dover Street.

Harry Swalley was born ca. 1874 in Missouri and married his wife, Emma, around 1905.²³⁴ Their son Leavitt was born ca. 1909.²³⁵ The Swalleys had moved near Oakland’s Lake Merritt by 1916, and in 1920 Harry was working as a concessionaire at an amusement park.²³⁶

²³³ 1907 Block Book.

²³⁴ 1910 Census.

²³⁵ Ibid.

5225 Dover Street passed ownership rapidly several times; in 1911 the house was owned by Gertrude Cogswell, in 1912 by Jonathan Schneider, and in 1914 by Wesley P. Howland.²³⁷ Wesley Howland was a clerk with a rail company who had previously lived on 33rd Street in Oakland before purchasing and moving in to the house on Dover. In 1920, Howland lived at 5225 Dover Street with his wife Edith and their four children, Wesley, Edith, Oliver, and Warren.²³⁸ The Howlands remained in residence at this house into the 1940s.²³⁹

Arthur and Rosa Stringer occupied the property during the 1960s.²⁴⁰ Stringer worked as a longshoreman for Far East Shipping Lines.

Current Historic Status

5225 Dover Street has an Oakland Cultural Heritage Survey (OCHS) rating of Dc2+, indicating that the building is of minor importance. Its contingency rating of “c” indicates that the building rating may be upgraded in the future if inappropriate alterations are reversed. The building is a contributor to the 55th and Dover Residential District, an Area of Secondary Importance (ASI). Buildings that contribute to ASIs are considered Potential Designated Historic Properties, or PDHPs.²⁴¹

Evaluation for the California Register

5225 Dover Street does not appear to be significant under any California Register criteria. It is not directly associated with important broader development trends or other specific events in the Temescal neighborhood (Criterion 1), nor is it associated with persons significant within a local, state, or national context (Criterion 2). Owners and occupants were working class people and little information was found on them in local and online archives that would indicate any level of significant contributions. The building is also not significant for its architecture because it is a relatively simple Craftsman style building and does not possess high artistic values. The builder, Harry M. Swalley, is not well-known and cannot be considered a master architect (Criterion 3).²⁴²

5225 Dover Street remains where it was originally constructed, and therefore retains integrity of location. The building appears to have been altered with some replacement windows and contemporary cladding, however it does retain some degree of integrity of materials, design, workmanship, and feeling as a largely intact early 20th-century residence. It retains some degree of integrity of setting within the residential neighborhood, though it sits in the shadow of the large modern Children’s Hospital Outpatient Building to the west and adjacent to a smaller contemporary building directly to the south. As no important historic event or person is associated with the property, it lacks integrity of association.

²³⁶ California Voter Registrations 1900-1968, Alameda County; 1920 Census.

²³⁷ 1911, 1912, and 1914 Block Books.

²³⁸ 1920 Census.

²³⁹ Polk’s 1946 Oakland City Directory.

²⁴⁰ Polk’s Oakland City Directory, 1967.

²⁴¹ “City of Oakland Historic Preservation Programs.”

²⁴² 5225 Dover Street was not evaluated for eligibility under Criterion 4, which is beyond the scope of this report since “potential to yield information important to the prehistory or history of California” typically relates to archeological resources, rather than built resources.

Evaluation for Designation as a City of Oakland Designated Historic Property

Page & Turnbull’s survey and evaluation assigns this building a rating of **D2+**, meaning that it is a building of minor importance, located in an ASI district and is recorded as a contributor to that district. Evaluative considerations for each of the fourteen criteria are included on the Evaluation Worksheet for this building found in the appendix.

5225 Dover Street as a Historical Resource Under CEQA

5225 Dover Street does not appear to be individually significant under any California Register criteria and received a “D” rating based on City of Oakland Designated Historic Property evaluation criteria. Therefore, 5225 Dover Street does not appear to be a historic resource under CEQA.

H. 665 53RD STREET



Figure 62. 665 53rd Street, looking southeast.
Source: Page & Turnbull, May 2013.

Description

665 53rd Street is a one-story, wood-frame office building with no discernible style (**Figure 62**). The rectangular-plan building is capped by a flat roof with a shed roof over a full-length front porch. A stepped false parapet is located toward the east end of the roof. The foundation is not visible. The building is clad in wood panel and beveled cladding. The primary façade faces north. Typical fenestration consists of fixed vinyl-sash windows with false muntins. Entrances include flush and partially-glazed wood doors. Architectural and site features include a front parking area, a fenced front yard, steps and a ramp leading to the porch, and wood posts at the porch. The building appears to be in good condition.

Historic Context

No records are available providing the construction date of 665 53rd Street, but the building appears to be less than 50 years old and was likely constructed after the Children’s Hospital and Research Center Oakland acquired the property in 1985. Buildings less than 50 years old do not fall under the provisions of CEQA and no historic research was conducted.

Current Historic Status

665 53rd Street is less than 50 years old. It does not have an Oakland Cultural Heritage Survey (OCHS) rating and is not listed as a contributor to the 55th and Dover Residential District.

Evaluation for the California Register

665 53rd Street is less than 45 years old and does not qualify as a historic resource under CEQA.

Evaluation for Designation as a City of Oakland Designated Historic Property

The building was not evaluated for designation as it is less than 45 years old.

665 53rd Street as a Historical Resource Under CEQA

In Conclusion, 665 53rd Street is not a historic resource under CEQA.

I. 671 53RD STREET



Figure 63. 671 53rd Street, looking south.
Source: Page & Turnbull, May 2013.

Description

Built in 1906, 671 53rd Street is a one-story, wood-frame, single-family residence designed in the Simple Bungalow style (**Figure 63**). The rectangular-plan building, clad in wood shingles, is capped by a hip roof clad in asphalt shingles. A hip-roof dormer at the front of the roof features a sliding aluminum-sash window. The foundation is not visible. The primary façade faces north. Typical fenestration consists of fixed and double-hung wood-sash windows. The primary entrance features a paneled, partially-glazed wood door. Architectural and site features include wood stairs, a recessed corner entry porch with a classical column, molded door and window surrounds, exposed rafter tails, and a brick chimney. The building appears to be in good condition.

Historic Context

Edward H. and Mary Davis purchased the vacant lot at 671 53rd Street in 1906 and hired Carl P. Kreisler to build a house on the property the same year.²⁴³ Edward Davis was born in Indiana ca. 1882 and married Mary Black, a California native, in 1904.²⁴⁴ The Davises had two children, Lucille and Elvin.²⁴⁵

The builder of 671 53rd Street was Carl Phillip Kreisler, an Ohio native born ca. 1860 to German immigrant parents.²⁴⁶ Kreisler was a contractor and house carpenter who resided in North Oakland and later in North Berkeley. Census and voter records show that the family moved frequently. Carl

²⁴³ 1906, 1907 Block Books; Building Permit #4474, 29 August 1906.

²⁴⁴ 1910 Census.

²⁴⁵ Ibid.; 1920 Census.

²⁴⁶ Ibid.

lived with his wife Minnie and their two grown children, who worked as a schoolteacher and a laborer.²⁴⁷

In 1910, property owner Edward Davis worked as a shipping clerk in a retail jewelry store. May’s sisters, Grace and Gertrude Black, lived with the Davis family. Grace worked as a financial clerk for the State Board of Health, and Gertrude worked as a department store salesperson. In 1920 the sisters still lived with the family, and Edward worked as a route agent at a newspaper.²⁴⁸ By 1930, the Davis’ house on 53rd Street was valued at \$3,000.²⁴⁹ At that time, Edward Davis was employed as an auto mechanic, and May’s retired father Robert Black lived at the house with them. They continued to reside at the address through the 1940 census.

Current Historic Status

671 53rd Street has an Oakland Cultural Heritage Survey (OCHS) rating of C2+, indicating that the building is of secondary importance. It is a contributor to the 55th and Dover Residential District, an Area of Secondary Importance (ASI). Buildings that contribute to ASIs or have a rating of C or higher are Potential Designated Historic Properties, or PDHPs.²⁵⁰

Evaluation for the California Register

671 53rd Street does not appear to be significant under any California Register criteria. It is not directly associated with important broader development trends or other specific events in the Temescal neighborhood (Criterion 1), nor is it associated with persons significant within a local, state, or national context (Criterion 2). Owners and occupants were working class people and little information was found on them in local and online archives that would indicate any level of significant contributions. Though little altered, the building is also not significant for its architecture because it is a relatively typical Simple Bungalow style building and does not possess high artistic values. The builder, Carl Phillip Kreisler, is not well-known and cannot be considered a master architect (Criterion 3).²⁵¹

671 53rd Street retains a high degree of integrity of location, design, materials, workmanship, and feeling as an early 20th-century residence. The building lacks integrity of setting, as the construction of the Grove-Shafter Freeway caused the closure of 53rd Street, and modern apartment buildings were constructed nearby. This block lacks the intact block-face and visual cohesiveness that characterize the rest of the 55th and Dover Residential District. As no important historic event or person is associated with the property, it lacks integrity of association.

Evaluation for Designation as a City of Oakland Designated Historic Property

Page & Turnbull’s survey and evaluation assigns this building a rating of **C2+**, meaning that it is a building of secondary importance, located in an ASI district and is recorded as a contributor to that

²⁴⁷ California Voter Registrations.

²⁴⁸ 1920 Census.

²⁴⁹ 1930 Census.

²⁵⁰ “City of Oakland Historic Preservation Programs.”

²⁵¹ 671 53rd Street was not evaluated for eligibility under Criterion 4, which is beyond the scope of this report since “potential to yield information important to the prehistory or history of California” typically relates to archeological resources, rather than built resources.

district. Evaluative considerations for each of the fourteen criteria are included on the Evaluation Worksheet for this building found in the Appendix.

671 53rd Street as a Historical Resource Under CEQA

671 53rd Street is not eligible for listing in the California Register and received a “C” rating based on City of Oakland Designated Historic Property evaluation criteria. Therefore, 671 53rd Street does not appear to be a historic resource under CEQA.

J. 675 53RD STREET



Figure 64. 675 53rd Street, looking south.
Source: Page & Turnbull, May 2013.

Description

Built ca. 1911, 675 53rd Street is a one-story over raised basement, wood-frame, single-family residence designed in the Simple Bungalow style (**Figure 64**). The rectangular-plan building, clad in textured stucco, is capped by a hip roof covered with asphalt shingles. A hip-roof dormer at the front of the roof contains a multi-light wood window. The foundation is not visible. The primary façade faces north. Typical fenestration consists of double-hung, wood-sash windows and multi-light wood-sash casement windows set in a six-sided window bay. The primary entrance features a partially glazed and paneled wood door. Architectural and site features include an integral garage with a roll-up door at the basement level, concrete stairs, a recessed corner entry porch with tapered wood posts, and a stucco-clad chimney. The building appears to be in good condition.

Historic Context

Minnie Bouton owned two vacant lots facing onto Dover Street from 1907 until ca. 1913.²⁵² The house at 675 53rd Street was constructed by Edward Collins ca. 1911.²⁵³ It is unlikely that Bouton ever lived on the property, as the 1910 Census shows her as a San Francisco resident. By 1913, the lots were divided, reoriented to front onto 53rd Street, and the eastern house and property sold to Ada E. Kinney. Kinney sold the property to Alma B. Anderson by 1914.²⁵⁴ No information was found on either woman.

²⁵² 1907, 1910, 1913 Block Books.

²⁵³ 1911 Block Book.

²⁵⁴ 1914 Block Book.

In 1920, Herman and Jamie Lewenthal rented the house at 675 53rd Street.²⁵⁵ Herman was born ca. 1877 in California to German immigrant parents and sold “men’s furnishings” at Smiths Money Back Store.²⁵⁶ Jamie Lewenthal was born ca. 1881 in England. The Lewenthals did not occupy the house long, as they lived in a house on Market Street in North Oakland in 1922.²⁵⁷

Henry C. and Irmgard J. Christian bought the property from Alma Anderson in 1921.²⁵⁸ One year earlier, in 1920, 37-year-old Henry C. Christian and his wife, 25-year-old Irmgard (or Irma) rented a house on 56th Street with Irmgard’s mother Mary McLean and a cousin, Charles H. Veary.²⁵⁹ Henry worked as an auto mechanic, and Charles Veary worked in a mill as a planing machine operator. The Christians sold 675 53rd Street after 1925 and lived in Berkeley by 1930.²⁶⁰

By 1930, Soren Gammelgard owned the house, which was valued at \$4,000.²⁶¹ The 55-year-old Danish immigrant lived there with his wife Marie, also a Danish immigrant, and their California-born son, Samuel. Soren and Marie immigrated to the United States in 1905. Soren worked as a motorman for the electric railroad, while Samuel worked as a fireman for the steam railroad.

By 1940, Anders and Elizabeth Yttrup owned the house. They lived with their young children William and Marylin. Like the Gammelgards, the Yttrups were Danish immigrants with California-born children. Anders was a maintenance man for a creamery.²⁶² The home then passed into the hands of Rebecca and George Avedikian, naturalized Turkish immigrants. George died at some point during the 1950s and Rebecca continued to live at 675 53rd Street. They had three children together, at least two of whom were grown and out of the house by the time they acquired the property.^{263 264}

Current Historic Status

675 53rd Street has an Oakland Cultural Heritage Survey (OCHS) rating of Dc2+, indicating that the building is of minor importance. Its contingency rating of “c” indicates that the building rating may be upgraded in the future if inappropriate alterations are reversed. The building is a contributor to the 55th and Dover Residential District, an Area of Secondary Importance (ASI). Buildings that contribute to ASIs are Potential Designated Historic Properties, or PDHPs.²⁶⁵

Evaluation for the California Register

675 53rd Street does not appear to be significant under any California Register criteria. It is not directly associated with important broader development trends or other specific events in the Temescal neighborhood (Criterion 1), nor is it associated with persons significant within a local, state, or national context (Criterion 2). Owners and occupants were working class people and little

²⁵⁵ 1920 Census.

²⁵⁶ Oakland City Directory, 1915; Ibid.

²⁵⁷ Oakland City Directory, 1922.

²⁵⁸ 1921, 1923 Block Books.

²⁵⁹ 1920 Census.

²⁶⁰ 1925 Block Book; 1930 Census.

²⁶¹ Ibid.

²⁶² 1940 Census

²⁶³ 1940 census

²⁶⁴ Polk’s Oakland City Directory.

²⁶⁵ “City of Oakland Historic Preservation Programs.”

information was found on them in local and online archives that would indicate any level of significant contributions. The building is also not significant for its architecture because it is an altered Simple Bungalow style building and does not possess high artistic values. The builder Edward Collins, is not well-known and cannot be considered a master architect (Criterion 3).²⁶⁶

675 53rd Street retains integrity of location, workmanship, and feeling as an early 20th-century residence. While the building appears to have been altered with a curved window bay and stucco cladding, it retains some degree of integrity of design and materials. The building lacks integrity of setting, as the construction of the Grove-Shafter Freeway caused the closure of 53rd Street, and modern apartment buildings were constructed nearby. This block lacks the intact block-face and visual cohesiveness that characterize the rest of the 55th and Dover Residential District. As no important historic event or person is associated with the property, it lacks integrity of association.

Evaluation for Designation as a City of Oakland Designated Historic Property

Page & Turnbull’s survey and evaluation assigns this building a rating of **D2+**, meaning that it is a building of minor importance, located in an ASI district and is recorded as a contributor to that district. Evaluative considerations for each of the fourteen criteria are included on the Evaluation Worksheet for this building found in the Appendix.

675 53rd Street as a Historical Resource Under CEQA

675 53rd Street is not eligible for listing in the California Register and received a “D” rating based on City of Oakland Designated Historic Property evaluation criteria. Therefore, 675 53rd Street does not appear to be a historic resource under CEQA.

²⁶⁶ 675 53rd Street was not evaluated for eligibility under Criterion 4, which is beyond the scope of this report since “potential to yield information important to the prehistory or history of California” typically relates to archeological resources, rather than built resources.

K. 677-679 53RD STREET



Figure 65. 677-679 53rd Street, looking south.
Source: Page & Turnbull, April 2008.

Description

Built in 1921, 677-679 53rd Street is a two-story, wood-frame, two-unit residence designed in a simplified Classical Revival style (**Figure 65**). The rectangular-plan building, clad in stucco, is capped by a hip roof clad in asphalt shingles. The foundation is not visible. The primary façade faces north. Typical fenestration consists of fixed and double-hung wood-sash windows, some set in a square window bay at the first story level. Visible windows have a four-over-one or two-over-one muntin pattern. The building has two entrances; one consists of a wood door behind a metal security gate and the other is a paneled, partially-glazed wood door. Architectural and site features include concrete stairs, pilasters flanking both entrances, and shallow hoods over both entries. The building appears to be in good condition. A one-story rear garage is shown on Sanborn Fire Insurance Maps dating from 1930, but no longer appears extant.

Historic Context

Minnie Bouton owned two vacant lots facing onto Dover Street from 1907 until ca. 1913.²⁶⁷ By 1913, the lots were divided, reoriented to front onto 53rd Street, and the undeveloped western lot was sold to Francis D. Giblin, a San Francisco resident who worked as a warehouse packer in 1910 and a chauffeur in 1920.²⁶⁸ Giblin sold the property to Gertrude W. and Fred G. Kelley ca. 1920.²⁶⁹

²⁶⁷ 1907, 1910, 1913 Block Books.

²⁶⁸ 1910, 1913 Block Books; 1910 Census; 1920 Census.

²⁶⁹ 1919, 1921 Block Books.

In 1921, 40-year-old Fred Kelley constructed a house for his family at 679 53rd Street at a cost of \$5,000.²⁷⁰ Fred was a civil engineer employed in the surveying and drafting industry.²⁷¹ Fred, his wife Gertrude, and their daughter Alice still lived in the house in 1930.²⁷²

The building was divided into two rental units by 1940. Albert and May Bowles began renting 679 53rd Street for 25 dollars a month before 1935.²⁷³ Albert was 60 years old and had been born in Missouri. May was born in California. They continued to live in the house until at least 1940. Albert was a machinist and worked for the Public Utility Company. Adam and Ella James, Scottish immigrants, rented the other half of the building, at 677 53rd St during the same period. They lived with their daughter Doris. Adam was a machine operator at paint manufacturer. Ella was a cook at a hospital. The building is currently used as offices for the Children’s Hospital.

Current Historic Status

677-679 53rd Street has an Oakland Cultural Heritage Survey (OCHS) rating of D2+, indicating that the building is of minor importance. It is a contributor to the 55th and Dover Residential District, an Area of Secondary Importance (ASI). Buildings that contribute to ASIs are Potential Designated Historic Properties, or PDHPs.²⁷⁴

Evaluation for the California Register

677-679 53rd Street does not appear to be significant under any California Register criteria. It is not directly associated with important broader development trends or other specific events in the Temescal neighborhood (Criterion 1), nor is it associated with persons significant within a local, state, or national context (Criterion 2). Owners and occupants were working class people and little information was found on them in local and online archives that would indicate any level of significant contributions. The building is also not significant for its architecture because it was designed in a very simplified Classical Revival style and does not possess high artistic values. The builder, Fred Kelley, a civil engineer, may have only built this house for himself and cannot be considered a master architect (Criterion 3).²⁷⁵

677-679 53rd Street retains integrity of location, design, and feeling as an early 20th-century residence. The building appears to have sustained few alterations and retains integrity of materials and workmanship. The building lacks integrity of setting, as the construction of the Grove-Shafter Freeway caused the closure of 53rd Street, and modern apartment buildings were constructed nearby. This block lacks the intact block-face and visual cohesiveness that characterize the rest of the 55th and Dover Residential District. As no important historic event or person is associated with the property and the building is no longer used as residences, it lacks integrity of association.

²⁷⁰ City of Oakland Building Permit #61301, 1921.

²⁷¹ 1930 Census.

²⁷² Ibid.

²⁷³ 1940 Census

²⁷⁴ “City of Oakland Historic Preservation Programs.”

²⁷⁵ 677-679 53rd Street was not evaluated for eligibility under Criterion 4, which is beyond the scope of this report since “potential to yield information important to the prehistory or history of California” typically relates to archeological resources, rather than built resources.

Evaluation for Designation as a City of Oakland Designated Historic Property

Page & Turnbull’s intensive survey and evaluation assigns this building a rating of **C2+**, meaning that it is a building of secondary importance, located in an ASI district and is recorded as a contributor to that district. Evaluative considerations for each of the fourteen criteria are included on the Evaluation Worksheet for this building found in the Appendix.

677-679 53rd Street as a Historical Resource Under CEQA

677-679 53rd Street is not eligible for listing in the California Register and received a “C” rating based on City of Oakland Designated Historic Property evaluation criteria. Therefore, 677-679 53rd Street does not appear to be a historic resource under CEQA.

L. 685-689 53RD STREET



Figure 66. 685-689 53rd Street, looking south.
Source: Page & Turnbull, May 2013.

Description

Built ca. 1914, 685-689 53rd Street is a one-story, wood-frame, mixed-use building with no discernible style (**Figure 66**). The rectangular-plan building, clad in smooth stucco, is capped by a flat roof. The foundation is not visible. The primary façade faces north. Typical fenestration consists of fixed and double-hung wood-sash windows and metal-sash plate glass windows. The commercial entrance features a partially-glazed wood door with a multi-light wood-sash transom and is located on the angled corner of the building. The residential entrance is recessed and located at the east end of the front façade. It contains a flush wood door and concrete steps clad in ceramic tiles. Architectural features include a ceramic tile water table and a flat, semi-circular hood over the commercial entrance. An associated garage is located to the south, and is not shown in the 1930 Sanborn map. The building appears to be in good condition.

Historic Context

Minnie Bouton owned two vacant lots facing onto Dover Street from 1907 until ca. 1913.²⁷⁶ By 1913, the lots were divided, reoriented to front onto 53rd Street, and the undeveloped property at 685-689 53rd Street was sold to Harvey M. Carter, a 41-year-old tailor.²⁷⁷

Carter commissioned the mixed-use building ca. 1914.²⁷⁸ The building contained a dwelling and a commercial unit, both occupied by Carter from 1915-16.²⁷⁹ Carter sold the property to Fred Josephson in 1918 and had moved to San Francisco by 1920.²⁸⁰

²⁷⁶ 1907, 1910, 1913 Block Books.

²⁷⁷ 1913 Block Book.

²⁷⁸ 1914 Block Book.

²⁷⁹ Polk’s Oakland/Berkeley/Alameda Directory, 1915, 1916.

²⁸⁰ 1918 Block Book; 1920 Census.

Fred Josephson and his family may have never lived at the property at 685-689 53rd Street. Josephson, a 54-year-old Navy officer born in Sweden, bought the property in 1918 and sold it three years later. In 1916, the Josephson family lived on the 600 block of 53rd Street, with Harvey Carter as a neighbor. By 1920, they lived on Andover Street in Oakland.²⁸¹ They sold the property at 685-689 53rd Street to C. E. and G. C. Lowell around 1921.²⁸²

It is unclear who in the Lowell family owned the property at 685-689 53rd Street. C. E. and G. C. Lowell bought the property ca. 1921, and Sophia Lowell, a widow in her thirties, is listed as the property owner in 1930.²⁸³ As early as 1923, however, Sophia, her daughter Elaine, and her brother John D. Lowell lived in the dwelling at 689 53rd Street and operated a grocery store in the commercial unit.²⁸⁴ After John’s death in 1933 or 1934, Sophia Lowell ran the grocery by herself until at least 1943. The commercial unit remained in use as a store until at least 1969.²⁸⁵ The Lowells previously operated a grocery at 6025 Shattuck Avenue.²⁸⁶

A small one-story ancillary building appears on Sanborn maps dating from 1930. This building was demolished between 1952 and 1967 and an addition to the dwelling unit at 685 53rd Street was constructed.²⁸⁷ A larger garage was constructed in the rear, probably at the same time as the addition.

Current Historic Status

685-689 53rd Street has an Oakland Cultural Heritage Survey (OCHS) rating of Fd2*, indicating that the building has been modernized. The “d” is a contingency rating indicating that the building may be eligible for a D rating in the future if inappropriate alterations are reversed. It is located in the 55th and Dover Residential District, an Area of Secondary Importance (ASI), but is not a contributor to that ASI.²⁸⁸

Evaluation for the California Register

685-689 53rd Street does not appear to be significant under any California Register criteria. It is not directly associated with important broader development trends or other specific events in the Temescal neighborhood (Criterion 1), nor is it associated with persons significant within a local, state, or national context (Criterion 2). Owners and occupants were working class people and little information was found on them in local and online archives that would indicate any level of significant contributions. The building is also not significant for its architecture because it is a very altered mix-used building without a discernible style. It does not possess high artistic values. The builder is unknown and cannot be considered a master architect (Criterion 3).²⁸⁹

²⁸¹ Polk’s Directory, 1916.

²⁸² 1920 Census.

²⁸³ 1921 Block Book; 1930 Census.

²⁸⁴ Polk’s Directory, 1923, 1933, 1943.

²⁸⁵ Ibid., 1923, 1933, 1943; 1969 Sanborn Map.

²⁸⁶ 1920 Census, Polk’s Directory, 1922.

²⁸⁷ 1952, 1967 Sanborn Fire Insurance Maps.

²⁸⁸ “City of Oakland Historic Preservation Programs.”

²⁸⁹ 685-689 53rd Street was not evaluated for eligibility under Criterion 4, which is beyond the scope of this report since “potential to yield information important to the prehistory or history of California” typically relates to archeological resources, rather than built resources.

685-689 53rd Street retains integrity of location. The building appears to have been altered with stucco cladding, replacement windows, and removal of storefront windows, and therefore lacks integrity of design, materials, workmanship, and feeling as a mixed-use building from the 1910s. It retains some degree of integrity of setting within a residential neighborhood. The building lacks integrity association since no important historic event or person is associated with the property and the storefront is no longer in use.

Evaluation for Designation as a City of Oakland Designated Historic Property

Page & Turnbull’s intensive survey and evaluation assigns this building a rating of **D2+**, meaning that it is a building of minor importance, located in an ASI district and is recorded as a contributor to that district. Evaluative considerations for each of the fourteen criteria are included on the Evaluation Worksheet for this building found in the Appendix.

685-689 53rd Street as a Historical Resource Under CEQA

685-689 53rd Street is not eligible for listing in the California Register and received a “D” rating based on City of Oakland Designated Historic Property evaluation criteria. Therefore, 685-689 53rd Street does not appear to be a historic resource under CEQA.

M. 707 53RD STREET



Figure 67. 707 53rd Street, looking south.
Source: Page & Turnbull, April 2008.

Description

Built in 1907, 707 53rd Street is a two-story, wood-frame residence designed in the Shingle style (**Figure 67**). The rectangular-plan building, clad in wood shingles, is capped by steep hip roof covered with asphalt shingles and featuring large hip-roof dormers and flared eaves. The foundation is concrete. The primary façade faces north. Typical fenestration consists of double-hung wood-sash windows and wood-sash casement windows in groups of four with louvered transoms. Some windows are set in square window bays that are capped with hip roofs and supported by brackets. The primary entrance features a flush wood door. Architectural and site features include concrete and wood stairs, molded door and window surrounds, a wood balconette, exposed rafter tails, and a brick chimney. The building appears to be in good condition. A detached garage is located at the southwest corner of the lot.

Historic Context

Anna Kaufman purchased two lots facing onto 53rd Street in 1906.²⁹⁰ In 1907, houses were constructed on both properties, the subject property at 707 53rd Street and the corner property to the east.²⁹¹ The house at 707 53rd Street was designed by architect William A. Walker and built by A. Walker & Son. William A. Walker, an Illinois native, was a partner in the North Oakland contracting firm of Walker & Bradhoff in 1910.²⁹² No information was found on Walker's other architectural

²⁹⁰ 1906 Block Book.

²⁹¹ Building Permit #8077, 13 April 1907.

²⁹² 1920 Census.

work. No information was found on A. Walker & Son, but the company was likely related to William A. Walker.

It is unclear whether Kaufman ever lived in the house at 707 53rd Street. Around 1908 she sold the house and property at 707 53rd Street to Elizabeth M. Scoby, age 52.²⁹³ Scoby was either widowed or divorced. The 1900 Census records that she lived on 10th Street as the partner of Cornelia Gardener, who operated a small rooming house.²⁹⁴ At that time, Scoby worked as a stenographer, but the 1910 Census shows her living off her own income.²⁹⁵ Around 1911, she sold the property to Estelle Oliver.²⁹⁶

The Oliver family—including 31-year-old Estelle, husband Frank, daughter Harriet, and mother Harriet Curtis—moved to 707 53rd Street from Oakland’s Fruitvale district. Oliver sold the property at 707 53rd Street to Milton D. Horner in 1919 or 1920.²⁹⁷ By 1920, the Olivers lived in Washington state.

In 1920, 34-year-old Milton Horner lived at 707 53rd Street with his wife Elsie, their son Howard, and Milton’s mother Mary.²⁹⁸ The house was mortgaged. Milton worked as the manager of a wholesale plumbing supplies company. By 1930, Mary no longer lived with the Horner family, and Milton and Elsie had another son, John Van Cleve.²⁹⁹ Milton continued to manage the plumbing supplies company. At that time the house was valued at \$5,000. Two rear auxiliary buildings, a one-story building and a two-story building, are shown in Sanborn Fire Insurance Maps dating from 1930, though neither appear extant today. Horner continued to live at 707 53rd Street and worked for Oakland Plumbing Supply Co. through World War II.³⁰⁰ The building was listed as vacant in the 1967 Oakland city directory, but was re-occupied in 1969 by Johnathon L. Moore.³⁰¹

Current Historic Status

707 53rd Street has an Oakland Cultural Heritage Survey (OCHS) rating of C2+, indicating that the building is of secondary importance. It is a contributor to the 55th and Dover Residential District, an Area of Secondary Importance (ASI). Buildings that contribute to ASIs or have a rating of C or higher are Potential Designated Historic Properties, or PDHPs.³⁰²

Evaluation for the California Register

707 53rd Street does not appear to be significant under any California Register criteria. It is not directly associated with important broader development trends or other specific events in the Temescal neighborhood (Criterion 1), nor is it associated with persons significant within a local,

²⁹³ 1908 Block Book.

²⁹⁴ 1900 Census.

²⁹⁵ 1910 Census.

²⁹⁶ 1911 Block Book.

²⁹⁷ 1919, 1920 Block Books.

²⁹⁸ 1920 Census.

²⁹⁹ 1930 Census.

³⁰⁰ U.S., *World War II Draft Registration Cards, 1942* [database on-line]. Provo, UT, USA: Ancestry.com Operations, Inc., 2010.

³⁰¹ Polk’s Oakland City Directory 1967

³⁰² “City of Oakland Historic Preservation Programs.”

state, or national context (Criterion 2). Owners and occupants were working- and middle-class people and little information was found on them in local and online archives that would indicate any level of significant contributions. Though quite intact, the building is also not significant for its architecture and it does not possess high artistic values. The architect was William A. Walker, but little information was found about his career and he cannot be considered a master architect (Criterion 3).³⁰³

707 53rd Street retains integrity of location, design, materials, workmanship, and feeling as an early 20th-century residence. The building lacks integrity of setting, as the large modern Children’s Hospital Outpatient Building has been constructed very close to the subject property. The building also lacks integrity of association as part of a dense residential neighborhood, as it is located on a block-face that is, for the most part, occupied by a large parking garage. This block lacks the intact block-face and visual cohesiveness that characterize the rest of the 55th and Dover Residential District.

Evaluation for Designation as a City of Oakland Designated Historic Property

Page & Turnbull’s intensive survey and evaluation assigns this building a rating of **C2+**, meaning that it is a building of secondary importance, located in an ASI district and is recorded as a contributor to that district. Evaluative considerations for each of the fourteen criteria are included on the Evaluation Worksheet for this building found in the Appendix.

707 53rd Street as a Historical Resource Under CEQA

707 53rd Street is not eligible for listing in the California Register and received a “C” rating based on City of Oakland Designated Historic Property evaluation criteria. Therefore, 707 53rd Street does not appear to be a historic resource under CEQA.

³⁰³ 707 53rd Street was not evaluated for eligibility under Criterion 4, which is beyond the scope of this report since “potential to yield information important to the prehistory or history of California” typically relates to archeological resources, rather than built resources.

N. 715 53RD STREET



Figure 68. 715 53rd Street, looking south.
Source: Page & Turnbull, April 2008.

Description

Built ca. 1906, 715 53rd Street is a one-story, wood-frame residence designed in the Craftsman style (**Figure 68**). The rectangular-plan building, clad in wood clapboard siding, is capped by a hip roof clad in asphalt shingles. A gable dormer at the front of the roof features a multi-light wood-sash window. The foundation is concrete. The primary façade faces north. Typical fenestration consists of fixed and casement wood-sash windows. The primary entrance features a paneled, partially-glazed wood door. Architectural and site features include concrete steps, a recessed corner porch, exposed purlins and rafter tails, and a brick chimney. The building appears to be in good condition. Two one-story auxiliary buildings are shown to the rear of the house in Sanborn Fire Insurance Maps dating from 1930.

Historic Context

J. V. Galindo bought the property at 715 53rd Street ca. 1906. Shortly afterwards, a house was constructed on the property.³⁰⁴ Census records from 1910 show 30-year-old J. Vincent Galindo living at 715 53rd Street with his wife Ellen and their young son J. Vincent.³⁰⁵ Galindo managed the Galindo estate, which was likely the grand family house at 5401 Telegraph Avenue.³⁰⁶ Galindo died in 1914 or 1915, and ownership of 715 53rd Street passed to Ellen I. Galindo. In 1920, the house was owned free of mortgages.³⁰⁷ It was valued at \$7,000 in 1930.³⁰⁸ At that time Ellen Galindo’s son Vincent and

³⁰⁴ 1906 Block Book.

³⁰⁵ 1910 Census.

³⁰⁶ Ibid.; “Danced in the Barn,” *Oakland Tribune*, 10 February 1900, 6.

³⁰⁷ 1920 Census.

³⁰⁸ 1930 Census.

his wife Doris lived with her, along with Ellen’s sister Martha Manning. Doris Galindo worked as a saleslady at a dry goods store. Ellen and Martha still resided at 715 53rd St in 1940, at which time the home was valued at \$3500.³⁰⁹

Current Historic Status

715 53rd Street has an Oakland Cultural Heritage Survey (OCHS) rating of Dc2+, indicating that the building is of minor importance. Its contingency rating of “c” indicates that the building rating may be upgraded in the future if inappropriate alterations are reversed. The building is a contributor to the 55th and Dover Residential District, an Area of Secondary Importance (ASI). Buildings that contribute to ASIs are Potential Designated Historic Properties, or PDHPs.³¹⁰

Evaluation for the California Register

715 53rd Street does not appear to be significant under any California Register criteria. It is not directly associated with important broader development trends or other specific events in the Temescal neighborhood (Criterion 1), nor is it associated with persons significant within a local, state, or national context (Criterion 2). Owners and occupants were working-class people and little information was found on them in local and online archives that would indicate any level of significant contributions. Though quite intact, the simple Craftsman style building is also not significant for its architecture and it does not possess high artistic values. The builder is unknown and cannot be considered a master architect (Criterion 3).³¹¹

715 53rd Street retains a high degree of integrity of location, design, materials, workmanship, and feeling as an early 20th-century residence. The building lacks integrity of setting, as the large modern Children’s Hospital Outpatient Building has been constructed immediately behind to the subject property and the hospital’s multi-story parking garage was constructed immediately adjacent to the west. The building lacks integrity of association as part of a dense residential neighborhood, as it is located on a block-face that is, for the most part, occupied by the large parking garage. This block lacks the intact block-face and visual cohesiveness that characterize the rest of the 55th and Dover Residential District.

Evaluation for Designation as a City of Oakland Designated Historic Property

Page & Turnbull’s intensive survey and evaluation assigns this building a rating of **C2+**, meaning that it is a building of secondary importance, located in an ASI district and is recorded as a contributor to that district. Evaluative considerations for each of the fourteen criteria are included on the Evaluation Worksheet for this building found in the Appendix.

715 53rd Street as a Historical Resource Under CEQA

715 53rd Street is not eligible for listing in the California Register and received a “C” rating based on City of Oakland Designated Historic Property evaluation criteria. Therefore, 715 53rd Street does not appear to be a historic resource under CEQA.

³⁰⁹ 1940 census.

³¹⁰ “City of Oakland Historic Preservation Programs.”

³¹¹ 715 53rd Street was not evaluated for eligibility under Criterion 4, which is beyond the scope of this report since “potential to yield information important to the prehistory or history of California” typically relates to archeological resources, rather than built resources.

O. 5204 MARTIN LUTHER KING JR. WAY



Figure 69. 5204 Martin Luther King Jr. Way, looking east.
Source: Page & Turnbull, May 2013.

Description

Estimated to have been built during the 1920s, 5204 Martin Luther King Jr. Way is a two-story, wood-frame residence set over an integral garage. It is designed in the Mediterranean Revival style (Figure 69). The rectangular-plan building, clad in smooth stucco, is capped by a cross-gable roof clad with red asphalt shingles and red tile decoration at the gable ends. The primary façade faces west. The façade fenestration consists of arched iron frame windows. The sides and rear feature double-hung wood-sash windows with ogee lugs. The primary entrance features a flush wood door within a small entry landing atop concrete steps. The foundation is not visible. Architectural and site features include molded rosette motifs above the façade windows and garage, spiral engaged columns at the living room window, iron balconettes, and two chimneys, one of which has a molded crown. The building appears to be in good condition.

Historic Context

Jacob Pederson acquired the parcel where 5204 Martin Luther King Jr. Way stands in 1910. A year later he was operating a grocery store out of two single-story abutting frame buildings at the very front of the lot, while living a few blocks away at 993 54th Street. He also maintained a small shed at the southeast corner of the parcel. By 1921 Pederson had relocated to 5206 Grove Street, the address historically associated with the larger of the two grocery buildings.³¹²

In 1922, he sold the parcel to H.C. Hagenson, who shortly thereafter constructed the extant two-story residence at the back of the lot where the small shed once stood. Hagenson, in turn, sold or leased the residence to Joseph Bossola in 1935.³¹³ Bossola, born in Italy in 1880, was a naturalized

³¹² Ancestry.com. *U.S. City Directories, 1821-1989*. Provo, UT, USA: Ancestry.com Operations, Inc., 2011. Website accessed on June 26, 2013.

³¹³ Polk’s City Directory, Oakland, 1935.

citizen, who worked for the City of Oakland as a street sweeper.³¹⁴ Bossola shared the residence with his spouse, Theresa, a seamstress, and their son Lawrence. Lawrence was born in California in 1913, and went on to enlist in 1942. Joseph and Theresa continued to reside at 5204 Grove Street until Joseph's death in 1968.³¹⁵

The grocery store continued to operate into the 1950s. By 1951, the larger of the two grocery buildings had been converted to storage, but the smaller abutting structure retained its original use. A new shed was also constructed during the 1940s at the northeast corner next to the residence, bringing the total number of building on the parcel to four. The dwelling is the only extant building on the parcel today. It is likely that the original store buildings and the adjacent home on the corner lot (5202 Grove Street) were demolished during the late 1960s when the Grove-Shafter Freeway (State Route 24) was built, and Grove Street and 52nd Street were widened to accommodate increasing traffic and the expanding BART system.

Current Historic Status

5204 Martin Luther King Jr. Way was given an Oakland Cultural Heritage Survey (OCHS) rating of D2+, indicating that it is a building of secondary importance that is located in the 55th and Dover Residential District, an Area of Secondary Importance (ASI), and contributes to that district. However, given the property's complete loss of integrity of setting, feeling, and association, the rating is no longer considered for evaluation purposes.

Evaluation for the California Register

5204 Martin Luther King Jr. Way does not appear to be significant under any California Register criteria. It is not directly associated with important broader development trends or other specific events in the Temescal neighborhood (Criterion 1), nor is it associated with persons significant within a local, state, or national context (Criterion 2). Owners and occupants were working class people and little information was found on them in local and online archives that would indicate any level of significant contributions. Though quite intact, the simple Craftsman style building is also not significant for its architecture and it does not possess high artistic values. The builder is unknown and cannot be considered a master architect (Criterion 3).³¹⁶

5204 Martin Luther King Jr. Way retains integrity of location, design, materials, and workmanship as a 1920s residence. However, it lacks integrity of setting, feeling, and association due to the surrounding development, the widening of both 52nd Street and Martin Luther King Jr. Way, and the loss of associated buildings on the parcel.

Evaluation for Designation as a City of Oakland Designated Historic Property

Page & Turnbull's intensive survey and evaluation assigns this building a rating of **C2+**, meaning that it is a building of secondary importance, located in the 55th and Dover Residential District (an ASI)

³¹⁴ Ancestry.com. *U.S., World War II Draft Registration Cards, 1942* [database on-line]. Provo, UT, USA: Ancestry.com Operations, Inc., 2010.

³¹⁵ Ancestry.com. *California, Death Index, 1940-1997* [database on-line]. Provo, UT, USA: Ancestry.com Operations Inc, 2000.

³¹⁶ 5204 Martin Luther King Jr. Way was not evaluated for eligibility under Criterion 4, which is beyond the scope of this report since "potential to yield information important to the prehistory or history of California" typically relates to archeological resources, rather than built resources.

and is recorded as a contributor to that district. Evaluative considerations for each of the fourteen criteria are included on the Evaluation Worksheet for this building found in the Appendix.

5204 Martin Luther King Jr. Way as a Historical Resource Under CEQA

5204 Martin Luther King Jr. Way is not eligible for listing in the California Register and received a “C” rating based on City of Oakland Designated Historic Property evaluation criteria. Therefore, 688 52nd Street does not appear to be a historic resource under CEQA.

XII. CONCLUSION

Page & Turnbull evaluated the Children's Hospital buildings and adjacent residential and commercial buildings to arrive at two findings which determine whether they are considered historic resources for the purposes of CEQA:

1. Individual rating of A or B under the Oakland Designated Historic Property Criteria for Eligibility; and
2. Eligibility for listing as an individual resource or historic district (hospital complex only) in the California Register.

The A/B Wing (Baby Hospital) of the Children's Hospital appears to be significant for its role in providing medical care and services to children and as a teaching hospital (California Register Criterion 1) as well as for its architectural merit (California Register Criterion 3). The A/B Wing was one of the earliest purpose-built hospitals for children in the East Bay, and is a building that embodies the distinctive characteristics of an early 20th-century hospital. Designed in 1926 by Edward W. Cannon, the reinforced concrete building is designed in a Northern Italian Renaissance style that features rich architectural detailing. The A/B Wing (Baby Hospital) retains integrity of location, workmanship, and association. However, integrity of design and materials is moderate and it lacks integrity of setting and feeling. Consequently, the A/B Wing (Baby Hospital) is not eligible for listing in the California Register of Historical Resources. However, based on a detailed evaluation for Landmark Eligibility, the A/B Wing (Baby Hospital) was assigned an Oakland Designated Historic Property rating of **B3** and is therefore considered a historic resource for the purposes of CEQA.

The B/C Wing, Bruce Lyon Memorial Research Center, and the Ford Diagnostic and Treatment Center at the Children's Hospital do not appear to possess sufficient significance or retain integrity to be eligible for listing in the California Register and were assigned Oakland Designated Historic Property ratings of **C3**. None of these buildings are considered historic resources under CEQA.

The A/B Wing and B/C Wing, when considered together as one building, are not eligible for listing in the California Register due to insufficient integrity. The A/B Wing and B/C Wing, when considered together as one building, are not eligible for listing in the California Register due to insufficient integrity. Based on a detailed evaluation for Landmark Eligibility, the A/B Wing and B/C Wing together are assigned an Oakland Designated Historic Property of **C3**. This means that they do not qualify as a historic resource under CEQA.

The magnolia tree to the east of the B/C Wing does not qualify as a historic resource under CEQA.

The other properties in the hospital complex are less than forty-five years old and do not qualify as historic resources according to CEQA. These buildings include the Cardiac Catheterization Lab, Central Plant/West Site Plant, Patient Tower, Cafeteria, Helistop, Outpatient Center, and parking garage.

None of the adjacent fourteen residential and commercial properties that were evaluated appear to be significant as individual historical resources under the criteria for eligibility to the California Register

of Historical Resources. Page & Turnbull was not tasked with evaluating the district for California Register eligibility; however, based on its current status as an ASI and reconnaissance surveys and research on fourteen properties, this district does not appear to possess sufficiently significant historical context or visual themes to qualify for listing in the California Register. One property was not age-eligible and was therefore not evaluated. Nine properties were assigned Oakland Designated Historic Property ratings of C2+ and four properties were assigned ratings of D2+.

In sum, none of the buildings on the Children’s Hospital site, nor the residential and commercial buildings in the vicinity, appear to qualify as historic resources under CEQA.

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F. OTHER

Dedication plaque at the base of the magnolia tree.

Stone and Mulloy Rendering, Children’s Hospital, Oakland, n.d.

XIV. APPENDICES

**A. OAKLAND GENERAL PLAN – HISTORIC PRESERVATION ELEMENT – APPENDIX D
(SEPTEMBER 1993)**

B. CITY OF OAKLAND EVALUATION SHEETS FOR LANDMARK ELIGIBILITY

**APPENDIX D: LANDMARKS PRESERVATION ADVISORY BOARD
GUIDELINES FOR DETERMINATION OF LANDMARK ELIGIBILITY**

(Appendix 3 of Landmarks Preservation Advisory Board's Rules of Procedure)

APPENDIX 3: GUIDELINES FOR DETERMINATION OF
ELIGIBILITY FOR LANDMARK DESIGNATION

These guidelines are for the purpose of interpreting the landmark eligibility criteria at Section 2002(p) of the Zoning Regulations. The guidelines are expressed as the attached Evaluation Criteria and Ratings for Landmark Eligibility and the accompanying Evaluation Sheet and Evaluation Tally Sheet.

In order to determine whether a property is eligible as a landmark, the property is rated on the Evaluation Sheet for each of the fourteen evaluation criteria shown on the Sheet and defined in the Evaluation Criteria and Ratings.

The Evaluation Sheet ratings are next converted to numerical scores on the Evaluation Tally Sheet and added together for a total score. The total scores are then converted into an overall rating -- A, B, C, or D.

Properties receiving A or B ratings are considered eligible as landmarks.

F-095 3APNDIX3.CB

LPAB FORM 3.1

City of Oakland -- Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY

Address _____

Name _____

A. ARCHITECTURE

- 1. Exterior/Design _____ E VG G FP
- 2. Interior _____ E VG G FP
- 3. Construction _____ E VG G FP
- 4. Designer/Builder _____ E VG G FP
- 5. Style/Type _____ E VG G FP

B. HISTORY

- 6. Person/Organization _____ E VG G FP
- 7. Event _____ E VG G FP
- 8. Patterns _____ E VG G FP
- 9. Age _____ E VG G FP
- 10. Site _____ E VG G FP

C. CONTEXT

- 11. Continuity _____ E VG G FP
- 12. Familiarity _____ E VG G FP

D. INTEGRITY

- 13. Condition _____ E VG G FP
- 14. Exterior Alterations _____ E VG G FP

Evaluated by _____ Date _____

STATUS	
Rating: _____	
City Landmark Eligibility:	<input type="checkbox"/> Eligible <input type="checkbox"/> Not eligible
National Register Status:	<input type="checkbox"/> Listed <input type="checkbox"/> In process
	<input type="checkbox"/> Determined eligible <input type="checkbox"/> Appears eligible
	<input type="checkbox"/> Appears ineligible
Site of Opportunity	<input type="checkbox"/>

This evaluation sheet was accepted by the Landmarks Preservation Advisory Board at its meeting of _____ (Date)

Attest: _____ (Secretary)

City of Oakland -- Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY

Address _____

Name _____

12	6	3	0	1. Exterior/Design	
6	3	2	0	2. Interior	
6	3	2	0	3. Construction	
4	2	1	0	4. Designer/Builder	
6	3	2	0	5. Style/Type	
				A. ARCHITECTURE TOTAL	(max. 26)
30	15	8	0	6. Person/Organization	
30	15	8	0	7. Event	
18	9	5	0	8. Patterns	
8	4	2	0	9. Age	
4	2	1	0	10. Site	
				B. HISTORY TOTAL	(max. 60)
4	2	1	0	11. Continuity	
14	7	4	0	12. Familiarity	
				C. CONTEXT TOTAL	(max. 14)
PRELIMINARY TOTAL (Sum of A, B and C)					(max. 100)
-0	-3%	-5%	-10%	13. Condition (From A,B and C total)	
-0	-25%	-50%	-75%	14. Exterior Alterations (From A,B and C total excluding 2)	
				D. INTEGRITY	
ADJUSTED TOTAL (Preliminary total minus Integrity):					

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B)

Not eligible

F-116 3EVALTAL.CB

CITY OF OAKLAND—LANDMARKS PRESERVATION ADVISORY BOARD
EVALUATION CRITERIA AND RATINGS
FOR LANDMARK ELIGIBILITY

GENERAL NOTE: IF A PROPERTY HAS EXPERIENCED KNOWN LOSSES OF INTEGRITY (CRITERIA GROUP D), CRITERIA GROUPS A, B AND C SHOULD NORMALLY BE APPLIED TO THE PROPERTY AS IT EXISTED BEFORE THOSE LOSSES WERE SUSTAINED. CRITERIA GROUP D SHOULD THEN BE APPLIED TO THE PROPERTY.

CRITERION	RATINGS	COMMENTS AND GUIDELINES
A. ARCHITECTURE		
1. EXTERIOR/DESIGN QUALITY OF FORM, COMPOSITION, DETAILING, AND ORNAMENT MEASURED IN PART ON ORIGINALITY, ARTISTIC MERIT, CRAFTSMANSHIP, SENSITIVITY TO SURROUNDINGS AND OVERALL VISUAL QUALITY.	E EXCELLENT VG VERY GOOD G GOOD FP UNDISTINGUISHED	APPLIES TO NATURAL FEATURES AS WELL AS TO MAN-MADE FEATURES. A "G" RATING IS APPROPRIATE FOR PROPERTIES WHICH HAVE ANY CLEARLY IDENTIFIABLE VISUAL OR DESIGN VALUE. AN "E" RATING IS APPROPRIATE FOR PROPERTIES WHICH BASED ON EXTERIOR VISUAL QUALITY ALONE APPEAR ELIGIBLE FOR OAKLAND LANDMARK DESIGNATIONS.
2. INTERIOR DESIGN QUALITY OF INTERIOR ARRANGEMENT, FINISH, CRAFTSMANSHIP AND/OR DETAIL OR ASSOCIATION WITH A PERSON, GROUP, ORGANIZATION OR INSTITUTION USING THE	E EXCELLENT VG VERY GOOD G GOOD FP UNDISTINGUISHED	IN MOST USES, THIS CRITERION WILL BE APPLIED ONLY TO INTERIORS WHICH ARE ACCESSIBLE TO THE PUBLIC. UNLIKE THE CASE OF EXTERIORS, THIS CRITERION SHOULD BE APPLIED TO INTERIORS AS THEY PRESENTLY EXIST, REGARDLESS OF ALTERATIONS.
3. CONSTRUCTION SIGNIFICANCE AS EXAMPLE OF A PARTICULAR STRUCTURAL MATERIAL, SURFACE MATERIAL OR METHOD OF CONSTRUCTION.	E ESPECIALLY FINE OR VERY EARLY EXAMPLE IF FEW SURVIVE VG ESPECIALLY FINE OR VERY EARLY EXAMPLE IF MANY SURVIVE; G GOOD EXAMPLE IF FEW SURVIVE. FP NO PARTICULAR INTEREST, SURVIVE OF ANY MATERIAL OR METHOD NOT GENERALLY IN CURRENT USE (SUCH AS BRICK MASONRY OR BALLOOM FRAMING) OR OF A HIGHLY DURABLE METHOD OF CONSTRUCTION (STEEL FRAME, REINFORCED CONCRETE, ETC.)	EXAMPLES OF "ESPECIALLY FINE" CONSTRUCTION METHODS OR STRUCTURAL MATERIALS INCLUDE THOSE WHICH SUCCESSFULLY ADDRESS CHALLENGING STRUCTURAL PROBLEMS, OR WHICH ARE TREATED AS VISIBLE DESIGN ELEMENTS THAT CONTRIBUTE SIGNIFICANTLY TO THE FEATURE'S OVERALL DESIGN QUALITY, OR WHICH EXHIBIT FINE CRAFTSMANSHIP. SURFACE MATERIALS SHOULD BE TREATED UNDER THIS CRITERION ONLY ACCORDING TO THEIR TYPE AND ACCORDING TO THE LEVEL OF CRAFTSMANSHIP WHICH THEY REPRESENT. THE CONTRIBUTION OF SURFACE MATERIALS TO A FEATURE'S DESIGN QUALITY SHOULD BE TREATED IN CRITERION 1. (EXTERIOR/DESIGN) EXAMPLES OF "ESPECIALLY FINE" SURFACE MATERIALS INCLUDE STONE (GRANITE, MARBLE) AND POLYCHROME TERRA COTTA.

CRITERION	RATINGS	COMMENTS AND GUIDELINES
<p>4. DESIGNER/BUILDER DESIGNED OR BUILT BY AN ARCHITECT, ENGINEER, BUILDER, ARTIST, OR OTHER DESIGNER WHO HAS MADE A SIGNIFICANT CONTRIBUTION TO THE COMMUNITY, STATE, OR NATION.</p>	<p>E DESIGNER OF PRIMARY IMPORTANCE. VG DESIGNER OF SECONDARY IMPORTANCE. G DESIGNER OF TERTIARY IMPORTANCE. FP DESIGNER UNKNOWN OR OF NO PARTICULAR INTEREST.</p>	<p>NORMALLY, AN ESPECIALLY ACTIVE DESIGNER WILL BE RATED AT LEAST "G".</p>
<p>5. STYLE/TYPE SIGNIFICANCE AS AN EXAMPLE OF A PARTICULAR TYPE, STYLE OR CONVENTION.</p>	<p>E ESPECIALLY FINE OR VERY EARLY EXAMPLE IF FEW SURVIVE. VG ESPECIALLY FINE OR VERY EARLY EXAMPLE IF MANY SURVIVE; GOOD EXAMPLE IF FEW SURVIVE. G GOOD EXAMPLE OF ANY TYPE, STYLE OR RECENT USE. FP OF NO PARTICULAR INTEREST.</p>	<p>A "GOOD EXAMPLE" SHOULD GENERALLY EXHIBIT MOST OF THE ARCHETYPICAL CHARACTERISTICS OF THE TYPE, STYLE OR CONVENTION THE EXAMPLE IS INTENDED TO REPRESENT.</p>
<p>B. HISTORY/ASSOCIATION</p>		
<p>6. PERSON/ORGANIZATION ASSOCIATED WITH THE LIFE OR ACTIVITIES OF A PERSON, GROUP, ORGANIZATION, OR INSTITUTION THAT HAS MADE A SIGNIFICANT CONTRIBUTION TO THE COMMUNITY, STATE OR NATION.</p>	<p>E PERSON/ORGANIZATION OF PRIMARY IMPORTANCE INTIMATELY CONNECTED WITH THE PROPERTY. VG PERSON/ORGANIZATION OF PRIMARY IMPORTANCE LOOSELY CONNECTED, OR PERSON/ORGANIZATION OF SECONDARY IMPORTANCE INTIMATELY CONNECTED. G PERSON/ORGANIZATION OF SECONDARY IMPORTANCE LOOSELY CONNECTED, OR PERSON/ORGANIZATION OF TERTIARY IMPORTANCE INTIMATELY CONNECTED. FP PERSON/ORGANIZATION OF TERTIARY IMPORTANCE LOOSELY CONNECTED OR NO CONNECTION WITH PERSON/ORGANIZATION OF IMPORTANCE.</p>	<p>THE SIGNIFICANCE OF THE PERSON, GROUP, ORGANIZATION OR INSTITUTION MUST ITSELF BE ESTABLISHED BEFORE THIS CRITERION IS APPLIED. SUCH SIGNIFICANCE MAY BE AT EITHER THE LOCAL, STATE OR NATIONAL/INTERNATIONAL LEVELS. "INTIMATELY CONNECTED" WILL OFTEN MEAN THAT THE FEATURE WAS INTIMATELY ASSOCIATED WITH AN IMPORTANT PERIOD IN THE LIFE OR ACTIVITIES OF THE PERSON, GROUP, ORGANIZATION OR INSTITUTION. A PERSON/ORGANIZATION OF PRIMARY IMPORTANCE AT THE LOCAL LEVEL WILL HAVE PLAYED A DECISIVE AND FAR REACHING ROLE IN THE DEVELOPMENT OF OAKLAND AS A COMMUNITY (EXAMPLES: MAYOR FRANK MOTT, CENTRAL PACIFIC RAILROAD.) A PERSON/ORGANIZATION OF SECONDARY IMPORTANCE AT THE LOCAL LEVEL WILL HAVE PLAYED A MAJOR OR LEADING (BUT NOT DECISIVE) ROLE IN THE DEVELOPMENT OF OAKLAND AS A COMMUNITY OR A DECISIVE ROLE IN THE DEVELOPMENT OF A PARTICULAR NEIGHBORHOOD OR OF A PARTICULAR ETHNIC GROUP OR SEGMENT OF THE COMMUNITY (EXAMPLES: H.C. CAPWELL, JAMES LARUE, LEW HING, REALTY SYNDICATE). A PERSON/ORGANIZATION OF TERTIARY IMPORTANCE AT THE LOCAL LEVEL WILL HAVE PLAYED A PROMINENT ROLE (BUT NOT A REAL LEADERSHIP ROLE) IN THE DEVELOPMENT OF A PARTICULAR NEIGHBORHOOD OR OF A PARTICULAR ETHNIC GROUP OR SEGMENT OF THE COMMUNITY (EXAMPLES: JOHN NICHOLL CHARLES HESSEMAN). THE STATE AND NATIONAL/INTERNATIONAL LEVELS ARE TREATED SIMILARLY.</p>
		<p>IF THE PROPERTY HAS BEEN SIGNIFICANTLY ALTERED SINCE THE TIME OF ITS ASSOCIATION WITH THE PERSON/ORGANIZATION AND IF SUCH ALTERATION IS NOT REFLECTED IN CRITERIA GROUP D, THEN THE PERSON/ORGANIZATION WILL BE CONSIDERED TO BE ONLY "LOOSELY CONNECTED" WITH THE PROPERTY.</p>

CRITERION	RATINGS	COMMENTS AND GUIDELINES
<p>7. EVENT ASSOCIATED WITH AN EVENT THAT HAS MADE A SIGNIFICANT CONTRIBUTION TO THE COMMUNITY, STATE OR NATION.</p>	<p>E EVENT OF PRIMARY IMPORTANCE INTIMATELY CONNECTED WITH THE PROPERTY. VG EVENT OF PRIMARY IMPORTANCE LOOSELY CONNECTED, OR EVENT OF SECONDARY IMPORTANCE INTIMATELY CONNECTED. G EVENT OF SECONDARY IMPORTANCE LOOSELY CONNECTED, OR EVENT OF TERTIARY IMPORTANCE INTIMATELY CONNECTED. FP EVENT OF TERTIARY IMPORTANCE LOOSELY CONNECTED OR NO CONNECTIONS WITH EVENT OF IMPORTANCE.</p>	<p>SEE COMMENTS FOR CRITERION 6 (PERSON/ORGANIZATION).</p>
<p>8. PATTERNS ASSOCIATED WITH AND EFFECTIVELY ILLUSTRATIVE OF BROAD PATTERNS OF CULTURAL, SOCIAL, POLITICAL, ECONOMIC, OR INDUSTRIAL HISTORY, OR OF THE DEVELOPMENT OF THE CITY, OR OF DISTINCT GEOGRAPHIC REGIONS OR ETHNIC GROUPS, OR OF A PARTICULAR WELL-DEFINED ERA.</p>	<p>E PATTERNS OF PRIMARY IMPORTANCE INTIMATELY CONNECTED WITH THE PROPERTY. VG PATTERNS OF PRIMARY IMPORTANCE LOOSELY CONNECTED, OR PATTERNS OF SECONDARY IMPORTANCE INTIMATELY CONNECTED. G PATTERNS OF SECONDARY IMPORTANCE LOOSELY CONNECTED, OR PATTERNS OF TERTIARY IMPORTANCE INTIMATELY CONNECTED. FP PATTERNS OF TERTIARY IMPORTANCE LOOSELY CONNECTED OR NO CONNECTION WITH PATTERNS OF IMPORTANCE.</p>	<p>A HELPFUL MEASURE OF THIS CRITERION IS TO CONSIDER HOW USEFUL THE PROPERTY WOULD BE FOR THE TEACHING OF CULTURAL HISTORY. A PROPERTY IS NORMALLY "INTIMATELY CONNECTED" WITH A PATTERN IF THE PROPERTY EXHIBITS THE ESSENCE OF THE PATTERN. A PROPERTY IS NORMALLY "LOOSELY CONNECTED" WITH A PATTERN IF THE PROPERTY ONLY EXHIBITS THE INFLUENCE OF THE PATTERN. A PATTERN WILL NORMALLY BE CONSIDERED "INTIMATELY CONNECTED" WITH THE PROPERTY IF ONLY A FEW EXAMPLES ASSOCIATED WITH THE PATTERN SURVIVE. "INTIMATE" AND "LOOSE" CONNECTIONS FOR SIGNIFICANTLY ALTERED PROPERTIES ARE TREATED THE SAME WAY AS FOR CRITERION 6 (PERSON/ORGANIZATION). SEE ALSO OTHER COMMENTS FOR CRITERION 6 (PERSON/ORGANIZATION).</p>
<p>9. AGE COMPARATIVELY OLD IN RELATION TO DEVELOPMENT OF THE CITY.</p>	<p>E ESTABLISHED PRIOR TO 1869. VG ESTABLISHED BETWEEN 1869 AND APRIL 1906. G ESTABLISHED BETWEEN MAY 1906 AND 1945. FP ESTABLISHED SINCE 1945.</p>	<p>THE WESTERN TERMINUS OF THE TRANSCONTINENTAL RAILROAD WAS COMPLETED IN OAKLAND IN 1869, INAUGURATING AN IMPORTANT PERIOD OF RAPID URBAN DEVELOPMENT. THE 1906 EARTHQUAKE HELPED STIMULATE ANOTHER IMPORTANT PERIOD OF RAPID DEVELOPMENT IN OAKLAND. AT THE END OF WORLD WAR II, URBAN DEVELOPMENT BEGAN TO SHIFT FROM CENTRAL CITIES LIKE OAKLAND TO THE SUBURBS. IF THE PROPERTY HAS BEEN SIGNIFICANTLY ALTERED SINCE THE TIME OF ITS ORIGINAL CONSTRUCTION OR ESTABLISHMENT, USE THE ORIGINAL DATE IF THE NATURE OF THE ORIGINAL DESIGN IS STILL RECOGNIZABLE (E.G. ROOF SHAPE OR AT LEAST SOME ELEMENTS OF THE ORIGINAL FACADE COMPOSITION); USE THE DATE OF THE ALTERATION IF THE NATURE OF THE ORIGINAL DESIGN IS NOT RECOGNIZABLE.</p>

CRITERION	RATINGS	COMMENTS AND GUIDELINES
<p>10. SITE RELATION OF FEATURE TO ITS ORIGINAL SITE AND NEIGHBORHOOD.</p>	<p>E HAS NOT BEEN MOVED. G HAS BEEN MOVED WITHIN THE BOUNDARIES OF ITS ORIGINAL SITE. F HAS BEEN RELOCATED TO A NEW SITE IN THE SAME NEIGHBORHOOD AS THE ORIGINAL SITE. P HAS BEEN RELOCATED TO A NEW SITE IN A DIFFERENT NEIGHBORHOOD.</p>	<p>*"ORIGINAL SITE" MEANS THE SITE OCCUPIED BY THE FEATURE AT THE TIME THE FEATURE ACHIEVED SIGNIFICANCE, WHICH IN SOME CASES MAY HAVE BEEN AFTER THE FEATURE WAS CONSTRUCTED OR ESTABLISHED.</p>
<p>C. CONTEXT 11. CONTINUITY CONTRIBUTES TO THE VISUAL, HISTORIC OR OTHER ENVIRONMENTAL CONTINUITY OR CHARACTER OF THE STREET OR AREA.</p>	<p>E HELPS ESTABLISH THE CHARACTER OF AN AREA OF PRIMARY IMPORTANCE OR CONSTITUTES A DISTRICT. V6 MAINTAINS THE CHARACTER OF AN AREA OF PRIMARY IMPORTANCE OR HELPS ESTABLISH THE CHARACTER OF AN AREA OF SECONDARY IMPORTANCE OR CONSTITUTES A FEATURE GROUP. G COMPATIBLE WITH THE CHARACTER OF AN AREA PRIMARY IMPORTANCE OR MAINTAINS THE CHARACTER OF AN AREA OF SECONDARY IMPORTANCE. FP INCOMPATIBLE WITH AN AREA OF PRIMARY IMPORTANCE OR NOT LOCATED IN AN AREA OF PRIMARY OR SECONDARY IMPORTANCE.</p>	<p>"AREA OF PRIMARY OR SECONDARY IMPORTANCE" GENERALLY MEANS A DISTRICT, GROUP OF PROPERTIES, OR OTHER AREA NOTABLE ENOUGH TO WARRANT SPECIAL RECOGNITION, SUCH AS INCLUSION IN THE CITY'S S-7 PRESERVATION COMBINING ZONE. AREAS OF PRIMARY IMPORTANCE ARE LIMITED TO POTENTIAL NATIONAL REGISTER DISTRICTS. IF THE FEATURE HAS BEEN REMOVED (I.E., GIVEN A "P" RATING UNDER CRITERION 14), AND THE PROPERTY HAS THEREFORE BECOME ONLY A "SITE", CONTINUITY SHOULD BE EVALUATED BY IMAGINING THE FEATURE RE-STORED TO ITS SITE, BUT IN THE EXISTING SURROUNDINGS.</p>
<p>12. FAMILIARITY PROMINENCE OR FAMILIARITY WITHIN THE NEIGHBORHOOD, CITY OR REGION.</p>	<p>E A FEATURE WHICH MAY BE TAKEN AS A SYMBOL FOR THE CITY OR REGION AS A WHOLE. V6 A CONSPICUOUS AND FAMILIAR FEATURE IN THE CONTEXT OF THE CITY OR REGION. G A CONSPICUOUS AND FAMILIAR FEATURE IN THE CONTEXT OF THE NEIGHBORHOOD. FP NOT PARTICULARLY CONSPICUOUS OR FAMILIAR.</p>	<p>A HELPFUL MEASURE OF THIS CRITERION IS TO CONSIDER WHETHER A TYPICAL RESIDENT OF THE NEIGHBORHOOD, CITY OR REGION WOULD NOTICE THE FEATURE AND REMEMBER IT. IF THE FEATURE HAS BEEN REMOVED, THIS CRITERION SHOULD BE EVALUATED BY CONSIDERING THE FEATURE'S ROLE (IF ANY) AS A "LANDMARK" PRIOR TO ITS REMOVAL.</p>
<p>D. INTEGRITY 13. CONDITION EXTENT TO WHICH THE FEATURE HAS EXPERIENCED DETERIORATION.</p>	<p>E NO APPARENT SURFACE WEAR OR STRUCTURAL PROBLEMS. G EXHIBITS ONLY MINOR SURFACE WEAR. F EXHIBITS CONSIDERABLE SURFACE WEAR OR SIGNIFICANT STRUCTURAL PROBLEMS. P EXHIBITS CONSIDERABLE SURFACE WEAR AND SIGNIFICANT STRUCTURAL PROBLEMS.</p>	<p>"MINOR SURFACE WEAR" GENERALLY MEANS THAT NO RE-PLACEMENT OF DESIGN ELEMENTS DUE TO DETERIORATION IS REQUIRED. "CONSIDERABLE SURFACE WEAR" GENERALLY MEANS THAT SOME DESIGN ELEMENTS HAVE DETERIORATED TO SUCH AN EXTENT THAT THEY MUST BE REPLACED. "SIGNIFICANT STRUCTURAL PROBLEMS" WILL GENERALLY BE ASSOCIATED WITH SAGGING FLOOR LINES, OUT-OF-PLUMB WALLS AND FIRE DAMAGE.</p>

CRITERION	RATINGS	COMMENTS AND GUIDELINES
14. EXTERIOR ALTERATIONS DEGREE OF ALTERATION TO IMPORTANT EXTERIOR MATERIALS AND DESIGN FEATURES.	E NO CHANGES OR VERY MINOR ALTERATIONS WHICH DO NOT CHANGE THE OVERALL CHARACTER. G MINOR CHANGES TO OVERALL CHARACTER. F MAJOR CHANGES TO OVERALL CHARACTER. P FEATURE HAS BEEN REMOVED OR DEMOLISHED.	

F- 1EVALUATE.CB
AUGUST 6, 1987

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 747 52nd Street, Oakland CA

Name: A/B Wing, Baby Hospital

A. ARCHITECTURE

- | | | | | | |
|----|---|---|----|---|----|
| 1. | Exterior/Design: <u>rhythmic fenestration, good ornament and design detail, including tile roofs, terra cotta cornice, chimney with arcaded cap, and two solarium bays</u> | E | VG | G | FP |
| 2. | Interior: <u>some reconfig. with double-loaded corridors and stair circ. remaining</u> | E | VG | G | FP |
| 3. | Construction: <u>pressed brick clad reinforced concrete, terra cotta, roof tiles, multi-paned large solarium windows</u> | E | VG | G | FP |
| 4. | Designer/Builder: <u>Oakland architect Edward W. Cannon</u> | E | VG | G | FP |
| 5. | Style/Type: <u>very good example of hosp. design and of N. Ital. Renaissance style</u> | E | VG | G | FP |

B. HISTORY

- | | | | | | |
|-----|---|---|----|---|----|
| 6. | Person/Organization: <u>oldest extant bldg. associated with earliest area children’s hospital, Children’s Hospital of the East Bay (historic Baby Hospital), a benevolent organization</u> | E | VG | G | FP |
| 7. | Event: <u>no known assoc. with sig. event</u> | E | VG | G | FP |
| 8. | Patterns: <u>intimately connected with pattern of improved healthcare for children</u> | E | VG | G | FP |
| 9. | Age: <u>built 1926</u> | E | VG | G | FP |
| 10. | Site: <u>not moved</u> | E | VG | G | FP |

C. CONTEXT

- | | | | | | |
|-----|--|---|----|---|----|
| 11. | Continuity: <u>not located in an API or ASI</u> | E | VG | G | FP |
| 12. | Familiarity: <u>east façade visible from elevated Grove-Shafter freeway (SR-24)</u> | E | VG | G | FP |

D. INTEGRITY

- | | | | | | |
|-----|--|---|---|---|---|
| 13. | Condition: <u>minor surface wear</u> | E | G | F | P |
| 14. | Exterior Alterations: <u>main arched entry demolished and replaced with modern entry, additions to third story, some windows infilled, and stairs installed at the southwest corner, though a majority of materials on the east, west, and north facades remain intact.</u> | E | G | F | P |

Evaluated by: Stacy Farr, Page & Turnbull Date: July 23, 2013

STATUS

Rating:

- City Landmark Eligibility: Eligible Not eligible
- National Register Status: Listed In process
- Determined eligible Appears eligible
- Appears ineligible
- Site of Opportunity

This evaluation sheet was accepted by the landmarks Preservation Advisory Board at its meeting of _____.

(Date)

Attest: _____

Secretary

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 747 52nd Street, Oakland CA

Name: A/B Wing, Baby Hospital

12	<input checked="" type="checkbox"/> 6	3	0	1. Exterior/Design	
6	3	2	0	2. Interior	
6	3	<input checked="" type="checkbox"/> 2	0	3. Construction	
4	2	<input checked="" type="checkbox"/> 1	0	4. Designer/Builder	
6	<input checked="" type="checkbox"/> 3	2	0	5. Style/Type	
				A. ARCHITECTURE TOTAL (max. 26)	12
30	<input checked="" type="checkbox"/> 15	8	0	6. Person/Organization	
30	15	8	<input checked="" type="checkbox"/> 0	7. Event	
18	<input checked="" type="checkbox"/> 9	5	0	8. Patterns	
8	4	<input checked="" type="checkbox"/> 2	0	9. Age	
<input checked="" type="checkbox"/> 4	2	1	0	10. Site	
				B. HISTORY TOTAL (max. 60)	30
4	2	1	<input checked="" type="checkbox"/> 0	11. Continuity	
14	7	4	0	12. Familiarity	
		<input checked="" type="checkbox"/> (2*)			
				C. CONTEXT TOTAL (max. 14)	2
PRELIMINARY TOTAL (Sum of A, B and C) (max. 100)					44
-0	<input checked="" type="checkbox"/> -3%	-5%	-	13. Condition (From A, B, and C total)	1.32
-0	-25%	-50%	10%	14. Exterior Alterations (From A, B and C total excluding 2)	16.5
		<input checked="" type="checkbox"/> (37.5%*)	-		
			75%		
				D. INTEGRITY	17.82
ADJUSTED TOTAL (Preliminary total minus Integrity)					26 (rounded from 26.18)

*Note: Score numbers averaged between G and F due to condition on the low end of G.

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B) Not eligible

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 747 52nd Street

Name: B/C Wing, Children’s Hospital

A. ARCHITECTURE

- | | | | | | |
|----|---|---|----|---|----|
| 1. | Exterior/Design: <u>modern compatible addition with respect to form, materials, scale, massing, and size; ornament at replicated bay from A/B Wing</u> | E | VG | G | FP |
| 2. | Interior: <u>not evaluated</u> | E | VG | G | FP |
| 3. | Construction: <u>steel frame concrete with brick cladding, steel-sash windows</u> | E | VG | G | FP |
| 4. | Designer/Builder: <u>Stone and Mulloy, active hospital designers</u> | E | VG | G | FP |
| 5. | Style/Type: <u>some Modernist design cues, reinterprets A/B Wing</u> | E | VG | G | FP |

B. HISTORY

- | | | | | | |
|-----|---|---|----|---|----|
| 6. | Person/Organization: <u>2nd expansion, growth of Children’s Hospital of East Bay</u> | E | VG | G | FP |
| 7. | Event: <u>no association with significant event</u> | E | VG | G | FP |
| 8. | Patterns: <u>assoc. with general pop. increase after WW2</u> | E | VG | G | FP |
| 9. | Age: <u>built 1946-1948</u> | E | VG | G | FP |
| 10. | Site: <u>not moved</u> | E | VG | G | FP |

C. CONTEXT

- | | | | | | |
|-----|---|---|----|---|----|
| 11. | Continuity: <u>not in API or ASI</u> | E | VG | G | FP |
| 12. | Familiarity: <u>only portions of rear façade are visible to the public</u> | E | VG | G | FP |

D. INTEGRITY

- | | | | | | |
|-----|---|---|---|---|---|
| 13. | Condition: <u>minor surface wear</u> | E | G | F | P |
| 14. | Exterior Alterations: <u>several additions to building, including one-story build-out on east façade and third story addition and alterations at locations of abutting West Site Plant and Patient Tower</u> | E | G | F | P |

Evaluated by: Stacy Farr, Page & Turnbull **Date:** July 23, 2013

<p>STATUS</p> <p>Rating:</p> <p>City Landmark Eligibility: <input type="checkbox"/> Eligible <input type="checkbox"/> Not eligible</p> <p>National Register Status: <input type="checkbox"/> Listed <input type="checkbox"/> In process</p> <p> <input type="checkbox"/> Determined eligible <input type="checkbox"/> Appears eligible</p> <p> <input type="checkbox"/> Appears ineligible</p> <p>Site of Opportunity <input type="checkbox"/></p>

This evaluation sheet was accepted by the landmarks Preservation Advisory Board at its meeting of _____.

(Date)

Attest: _____

Secretary

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 747 52nd Street

Name: B/C Wing, Children's Hospital

12	6	<input checked="" type="checkbox"/> 3	0	1. Exterior/Design	
6	3	2	0	2. Interior	
6	3	<input checked="" type="checkbox"/> 2	0	3. Construction	
4	<input checked="" type="checkbox"/> 2	1	0	4. Designer/Builder	
6	3	<input checked="" type="checkbox"/> 2	0	5. Style/Type	
				A. ARCHITECTURE TOTAL (max. 26)	9
30	15	<input checked="" type="checkbox"/> 8	0	6. Person/Organization	
30	15	8	<input checked="" type="checkbox"/> 0	7. Event	
18	9	<input checked="" type="checkbox"/> 5	0	8. Patterns	
8	4	2	<input checked="" type="checkbox"/> 0	9. Age	
<input checked="" type="checkbox"/> 4	2	1	0	10. Site	
				B. HISTORY TOTAL (max. 60)	17
4	2	1	<input checked="" type="checkbox"/> 0	11. Continuity	
14	7	4	<input checked="" type="checkbox"/> 0	12. Familiarity	
				C. CONTEXT TOTAL (max. 14)	0
PRELIMINARY TOTAL (Sum of A, B and C) (max. 100)					26
-0	<input checked="" type="checkbox"/> -3%	-5%	-10%	13. Condition (From A, B, and C total)	.78
-0	-25%	<input checked="" type="checkbox"/> -50%	-75%	14. Exterior Alterations (From A, B and C total excluding 2)	13
				D. INTEGRITY	13.78
ADJUSTED TOTAL (Preliminary total minus Integrity)					12 (rounded from 12.22)

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B) Not eligible

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 747 52nd Street

Name: A/B Wing and B/C Wing together, Children’s Hospital

A. ARCHITECTURE

- 1. **Exterior/Design:** very good form and design as an original Northern Italian Renaissance design with a modern compatible addition that forms a U-plan with center courtyard. Use of terra cotta cornice, solarium bays with matching ornament on both wings. E **VG** G **FP**
- 2. **Interior:** not evaluated E **VG** G **FP**
- 3. **Construction:** steel frame concrete with brick cladding E **VG** **G** **FP**
- 4. **Designer/Builder:** Edward W. Cannon and Stone and Mulloy E **VG** G **FP**
- 5. **Style/Type:** very good example of hospital design and N. Italian Renaissance Style with simpler Modern interpretation at addition (B/C Wing) E **VG** G **FP**

B. HISTORY

- 6. **Person/Organization:** growth of Children’s Hospital of East Bay E **VG** **G** **FP**
- 7. **Event:** no association with significant event E **VG** G **FP**
- 8. **Patterns:** assoc. with improved healthcare for children and the need for larger facilities to serve general population increase after World War II E **VG** G **FP**
- 9. **Age:** built 1926; 1946-1948 E **VG** **G** **FP**
- 10. **Site:** not moved E **VG** G **FP**

C. CONTEXT

- 11. **Continuity:** not in API or ASI E **VG** G **FP**
- 12. **Familiarity:** only portion of east façade on A/B Wing are visible to the public E **VG** **G** **FP**

D. INTEGRITY

- 13. **Condition:** minor surface wear E **G** F P
- 14. **Exterior Alterations:** additions to both wings include demolition of main arched entry and replacement with modern 2-story entry in 1962; additions to third story on both wings; one-story build-out on east façade of B/C Wing; infill of some windows on A/B Wing; exterior alterations due to attachment of later additions. Many original features and ornament are retained, however. E **G** **F** P

Evaluated by: Christina Dikas, Page & Turnbull **Date:** July 12, 2013

STATUS

Rating:

City Landmark Eligibility: Eligible Not eligible

National Register Status: Listed In process

Determined eligible Appears eligible

Appears ineligible

Site of Opportunity

This evaluation sheet was accepted by the landmarks Preservation Advisory Board at its meeting of _____.

(Date)

Attest: _____

Secretary

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 747 52nd Street

Name: A/B Wing and B/C Wing together, Children’s Hospital

12	6	3	0	1. Exterior/Design	
6	3	2	0	2. Interior	
6	3	2	0	3. Construction	
4	2	1	0	4. Designer/Builder	
6	3	2	0	5. Style/Type	
A. ARCHITECTURE TOTAL (max. 26)					13
30	15	8	0	6. Person/Organization	
30	15	8	0	7. Event	
18	9	5	0	8. Patterns	
8	4	2	0	9. Age	
		(1*)		10. Site	
4	2	1	0		
B. HISTORY TOTAL (max. 60)					22
4	2	1	0	11. Continuity	
14	7	4	0	12. Familiarity	
		(1*)			
C. CONTEXT TOTAL (max. 14)					1
PRELIMINARY TOTAL (Sum of A, B and C) (max. 100)					36
-0	-3%	-5%	-10%	13. Condition (From A, B, and C total)	1.08
-0	-25%	-50%	-75%	14. Exterior Alterations (From A, B and C total excluding 2)	13.5
		(37.5%*)			
D. INTEGRITY					14.58
ADJUSTED TOTAL (Preliminary total minus Integrity)					21 (rounded from 21.42)

*Note: Score numbers averaged between G and F due to condition on the low end of G.

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B) Not eligible

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 747 52nd Street

Name: Bruce Lyon Memorial Research Center

A. ARCHITECTURE

- | | | | | | |
|----|--|----------|-----------|----------|-----------|
| 1. | Exterior/Design: <u>International style details at windows, vestibule, cladding</u> | E | VG | G | FP |
| 2. | Interior: <u>not evaluated</u> | E | VG | G | FP |
| 3. | Construction: <u>steel frame amd concrete construction with brick cladding</u> | E | VG | G | FP |
| 4. | Designer/Builder: <u>Stone, Marraccini and Patterson, not sig. example</u> | E | VG | G | FP |
| 5. | Style/Type: <u>good exprsn. of Intl. style at 1st story, expression reduced by addtn.</u> | E | VG | G | FP |

B. HISTORY

- | | | | | | |
|-----|--|----------|-----------|----------|-----------|
| 6. | Person/Organization: <u>assoc. with expanding scope of Hosp. mission, CHORI</u> | E | VG | G | FP |
| 7. | Event: <u>no assoc. with sig. event</u> | E | VG | G | FP |
| 8. | Patterns: <u>assoc. with shifts in hosp. design and mission</u> | E | VG | G | FP |
| 9. | Age: <u>built 1958</u> | E | VG | G | FP |
| 10. | Site: <u>not moved</u> | E | VG | G | FP |

C. CONTEXT

- | | | | | | |
|-----|---|----------|-----------|----------|-----------|
| 11. | Continuity: <u>not in API or ASI but maintains char. or area (hosp. complex)</u> | E | VG | G | FP |
| 12. | Familiarity: <u>orig. prime. fac. barely visible, addition blocks view of orig. bldg..</u> | E | VG | G | FP |

D. INTEGRITY

- | | | | | | |
|-----|---|----------|----------|----------|----------|
| 13. | Condition: <u>minor surface wear</u> | E | G | F | P |
| 14. | Exterior Alterations: <u>1974 addition completely overshadows orig. building</u> | E | G | F | P |

Evaluated by: Stacy Farr, Page & Turnbull **Date:** June 25, 2013

STATUS

Rating:

- | | | |
|----------------------------|--|---|
| City Landmark Eligibility: | <input type="checkbox"/> Eligible | <input type="checkbox"/> Not eligible |
| National Register Status: | <input type="checkbox"/> Listed | <input type="checkbox"/> In process |
| | <input type="checkbox"/> Determined eligible | <input type="checkbox"/> Appears eligible |
| | <input type="checkbox"/> Appears ineligible | |

Site of Opportunity

This evaluation sheet was accepted by the landmarks Preservation Advisory Board at its meeting of _____.

(Date)

Attest: _____

Secretary

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 747 52nd Street

Name: Bruce Lyon Memorial Research Center

12	6	<input checked="" type="checkbox"/> 3	0	1. Exterior/Design	
6	3	2	0	2. Interior	
6	3	<input checked="" type="checkbox"/> 2	0	3. Construction	
4	<input checked="" type="checkbox"/> 2	1	0	4. Designer/Builder	
6	3	<input checked="" type="checkbox"/> 2	0	5. Style/Type	
				A. ARCHITECTURE TOTAL (max. 26)	9
30	15	<input checked="" type="checkbox"/> 8	0	6. Person/Organization	
30	15	8	<input checked="" type="checkbox"/> 0	7. Event	
18	9	<input checked="" type="checkbox"/> 5	0	8. Patterns	
8	4	2	<input checked="" type="checkbox"/> 0	9. Age	
<input checked="" type="checkbox"/> 4	2	1	0	10. Site	
				B. HISTORY TOTAL (max. 60)	17
4	2	1	<input checked="" type="checkbox"/> 0	11. Continuity	
14	7	4	<input checked="" type="checkbox"/> 0	12. Familiarity	
				C. CONTEXT TOTAL (max. 14)	0
PRELIMINARY TOTAL (Sum of A, B and C) (max. 100)					26
-0	<input checked="" type="checkbox"/> -3%	-5%	-10%	13. Condition (From A, B, and C total)	.78
-0	-25%	<input checked="" type="checkbox"/> -50%	-75%	14. Exterior Alterations (From A, B and C total excluding 2)	13
				D. INTEGRITY	13.78
ADJUSTED TOTAL (Preliminary total minus Integrity) 12 (rounded from 12.22)					

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B) Not eligible

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 747 52nd Street

Name: Ford Research and Diagnostic Center

A. ARCHITECTURE

- 1. **Exterior/Design:** International style /utilitarian design, little ornament E VG **G** FP
- 2. **Interior:** small offices, flexible spaces, labs E VG **G** FP
- 3. **Construction:** steel frame concrete with brick cladding E VG **G** FP
- 4. **Designer/Builder:** Stone, Marraccini and Patterson, not a significant example E VG **G** FP
- 5. **Style/Type:** Intl. design cues- glass wall, ribbon windows, asymmetry. Addition. E VG **G** FP

B. HISTORY

- 6. **Person/Organization:** continued association with Children’s Hospital E VG **G** FP
- 7. **Event:** no known association with any significant event E VG **G** FP
- 8. **Patterns:** assoc. with CHO’s continued expanding role (research) & hosp. design E VG **G** FP
- 9. **Age:** built 1963 E VG **G** FP
- 10. **Site:** not moved E VG **G** FP

C. CONTEXT

- 11. **Continuity:** not in API or ASI but maintains char. of area (hosp. site) E VG **G** FP
- 12. **Familiarity:** two facades visible from street E VG **G** FP

D. INTEGRITY

- 13. **Condition:** minor surface wear E **G** **F** P
- 14. **Exterior Alterations:** addtn. to bldg. change scale & stylistic expression, changes to site obscure orig. bldg. design and reorient entrance to bldg. E **G** **F** P

Evaluated by: Stacy Farr, Page & Turnbull **Date:** June 25, 2013

STATUS	
Rating:	
City Landmark Eligibility: <input type="checkbox"/> Eligible	<input type="checkbox"/> Not eligible
National Register Status: <input type="checkbox"/> Listed	<input type="checkbox"/> In process
<input type="checkbox"/> Determined eligible	<input type="checkbox"/> Appears eligible
<input type="checkbox"/> Appears ineligible	
Site of Opportunity <input type="checkbox"/>	

This evaluation sheet was accepted by the landmarks Preservation Advisory Board at its meeting of _____.
(Date)

Attest: _____
Secretary

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 747 52nd Street

Name: Ford Research and Diagnostic Center

12	6	<input checked="" type="checkbox"/> 3	0	1. Exterior/Design	
6	3	2	<input checked="" type="checkbox"/> 0	2. Interior	
6	3	<input checked="" type="checkbox"/> 2	0	3. Construction	
4	<input checked="" type="checkbox"/> 2	1	0	4. Designer/Builder	
6	3	<input checked="" type="checkbox"/> 2	0	5. Style/Type	
				A. ARCHITECTURE TOTAL (max. 26)	9
30	15	<input checked="" type="checkbox"/> 8	0	6. Person/Organization	
30	15	8	<input checked="" type="checkbox"/> 0	7. Event	
18	9	<input checked="" type="checkbox"/> 5	0	8. Patterns	
8	4	2	<input checked="" type="checkbox"/> 0	9. Age	
<input checked="" type="checkbox"/> 4	2	1	0	10. Site	
				B. HISTORY TOTAL (max. 60)	17
4	2	1	<input checked="" type="checkbox"/> 0	11. Continuity	
14	7	<input checked="" type="checkbox"/> 4	0	12. Familiarity	
				C. CONTEXT TOTAL (max. 14)	4
PRELIMINARY TOTAL (Sum of A, B and C) (max. 100)					30
-0	<input checked="" type="checkbox"/> -3%	-5%	-10%	13. Condition (From A, B, and C total)	.90
-0	-25%	<input checked="" type="checkbox"/> -50%	-75%	14. Exterior Alterations (From A, B and C total excluding 2)	15
				D. INTEGRITY	15.90
ADJUSTED TOTAL (Preliminary total minus Integrity)					14 (rounded from 14.1)

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B) Not eligible

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 682 52nd Street

Name: _____

A. ARCHITECTURE

- | | | | | | |
|----|--|----------|-----------|----------|-----------|
| 1. | Exterior/Design: <u>nested roofs, stucco stair walls, roof brackets, gable roof, asymmetrical</u> | E | VG | G | FP |
| 2. | Interior: <u>not evaluated</u> | E | VG | G | FP |
| 3. | Construction: <u>wood frame with stucco cladding</u> | E | VG | G | FP |
| 4. | Designer/Builder: <u>Rockford L. Robins, local contractor, no known sig.</u> | E | VG | G | FP |
| 5. | Style/Type: <u>good example of simple Craftsman bungalow</u> | E | VG | G | FP |

B. HISTORY

- | | | | | | |
|-----|--|----------|-----------|----------|-----------|
| 6. | Person/Organization: <u>no known assoc. with important person or organization</u> | E | VG | G | FP |
| 7. | Event: <u>no known assoc. with specific important event</u> | E | VG | G | FP |
| 8. | Patterns: <u>style and location assoc. with residential expansion, late d.o.c. for area</u> | E | VG | G | FP |
| 9. | Age: <u>built 1922</u> | E | VG | G | FP |
| 10. | Site: <u>unmoved</u> | E | VG | G | FP |

C. CONTEXT

- | | | | | | |
|-----|--|----------|-----------|----------|-----------|
| 11. | Continuity: <u>maintains character of the ASI</u> | E | VG | G | FP |
| 12. | Familiarity: <u>not noticeable or conspicuous in the neighborhood</u> | E | VG | G | FP |

D. INTEGRITY

- | | | | | | |
|-----|---|----------|----------|----------|----------|
| 13. | Condition: <u>minor surface wear</u> | E | G | F | P |
| 14. | Exterior Alterations: <u>possible stucco reclad, some windows replaced, porch enclosed</u> | E | G | F | P |

Evaluated by: Stacy Farr, Page & Turnbull Date: June 25, 2013

STATUS

Rating:

- | | | |
|----------------------------|--|---|
| City Landmark Eligibility: | <input type="checkbox"/> Eligible | <input type="checkbox"/> Not eligible |
| National Register Status: | <input type="checkbox"/> Listed | <input type="checkbox"/> In process |
| | <input type="checkbox"/> Determined eligible | <input type="checkbox"/> Appears eligible |
| | <input type="checkbox"/> Appears ineligible | |

Site of Opportunity

This evaluation sheet was accepted by the landmarks Preservation Advisory Board at its meeting of _____.

(Date)

Attest: _____

Secretary

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 682 52nd Street

Name: _____

12	6	<input checked="" type="checkbox"/> 3	0	1. Exterior/Design	
6	3	2	0	2. Interior	
6	3	<input checked="" type="checkbox"/> 2	0	3. Construction	
4	2	1	<input checked="" type="checkbox"/> 0	4. Designer/Builder	
6	3	<input checked="" type="checkbox"/> 2	0	5. Style/Type	
A. ARCHITECTURE TOTAL (max. 26)					7
30	15	8	<input checked="" type="checkbox"/> 0	6. Person/Organization	
30	15	8	<input checked="" type="checkbox"/> 0	7. Event	
18	9	<input checked="" type="checkbox"/> 5	0	8. Patterns	
8	4	<input checked="" type="checkbox"/> 2	0	9. Age	
<input checked="" type="checkbox"/> 4	2	1	0	10. Site	
B. HISTORY TOTAL (max. 60)					11
4	2	<input checked="" type="checkbox"/> 1	0	11. Continuity	
14	7	4	<input checked="" type="checkbox"/> 0	12. Familiarity	
C. CONTEXT TOTAL (max. 14)					1
PRELIMINARY TOTAL (Sum of A, B and C) (max. 100)					19
-0	-3%	<input checked="" type="checkbox"/> -5%	-10%	13. Condition (From A, B, and C total)	.57
-0	<input checked="" type="checkbox"/> -25%	-50%	-75%	14. Exterior Alterations (From A, B and C total excluding 2)	4.75
D. INTEGRITY					5.32
ADJUSTED TOTAL (Preliminary total minus Integrity)					14 (rounded from 13.68)

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B) Not eligible

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 688 52nd Street

Name: _____

A. ARCHITECTURE

- | | | | | | |
|----|--|----------|-----------|----------|-----------|
| 1. | Exterior/Design: <u>asymmetry, front-gable porch, massive stucco stair walls, roof brackets</u> | E | VG | G | FP |
| 2. | Interior: <u>not evaluated</u> | E | VG | G | FP |
| 3. | Construction: <u>no sig. materials or methods used</u> | E | VG | G | FP |
| 4. | Designer/Builder: <u>local builder Martin Bensen</u> | E | VG | G | FP |
| 5. | Style/Type: <u>modest but good example of Craftsman bungalow</u> | E | VG | G | FP |

B. HISTORY

- | | | | | | |
|-----|--|----------|-----------|----------|-----------|
| 6. | Person/Organization: <u>no known assoc. with significant person or organization</u> | E | VG | G | FP |
| 7. | Event: <u>no known association with significant event</u> | E | VG | G | FP |
| 8. | Patterns: <u>style & location assoc. with res. development, late const. date (1922)</u> | E | VG | G | FP |
| 9. | Age: <u>built 1922</u> | E | VG | G | FP |
| 10. | Site: <u>not moved</u> | E | VG | G | FP |

C. CONTEXT

- | | | | | | |
|-----|---|----------|-----------|----------|-----------|
| 11. | Continuity: <u>maintains character of ASI</u> | E | VG | G | FP |
| 12. | Familiarity: <u>not particularly conspicuous in neighborhood</u> | E | VG | G | FP |

D. INTEGRITY

- | | | | | | |
|-----|--|----------|----------|----------|----------|
| 13. | Condition: <u>only minor surface wear</u> | E | G | F | P |
| 14. | Exterior Alterations: <u>new windows, re-clad, minor changes to character</u> | E | G | F | P |

Evaluated by: Stacy Farr, Page & Turnbull Date: June 25, 2013

STATUS

Rating:

- | | | |
|----------------------------|--|---|
| City Landmark Eligibility: | <input type="checkbox"/> Eligible | <input type="checkbox"/> Not eligible |
| National Register Status: | <input type="checkbox"/> Listed | <input type="checkbox"/> In process |
| | <input type="checkbox"/> Determined eligible | <input type="checkbox"/> Appears eligible |
| | <input type="checkbox"/> Appears ineligible | |

Site of Opportunity

This evaluation sheet was accepted by the landmarks Preservation Advisory Board at its meeting of _____.

(Date)

Attest: _____

Secretary

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 688 52nd Street

Name: _____

12	6	<input checked="" type="checkbox"/> 3	0	1. Exterior/Design	
6	3	2	0	2. Interior	
6	3	<input checked="" type="checkbox"/> 2	0	3. Construction	
4	2	1	<input checked="" type="checkbox"/> 0	4. Designer/Builder	
6	3	<input checked="" type="checkbox"/> 2	0	5. Style/Type	
A. ARCHITECTURE TOTAL (max. 26)					7
30	15	8	<input checked="" type="checkbox"/> 0	6. Person/Organization	
30	15	8	<input checked="" type="checkbox"/> 0	7. Event	
18	9	<input checked="" type="checkbox"/> 5	0	8. Patterns	
8	4	<input checked="" type="checkbox"/> 2	0	9. Age	
<input checked="" type="checkbox"/> 4	2	1	0	10. Site	
B. HISTORY TOTAL (max. 60)					11
4	2	<input checked="" type="checkbox"/> 1	0	11. Continuity	
14	7	4	<input checked="" type="checkbox"/> 0	12. Familiarity	
C. CONTEXT TOTAL (max. 14)					1
PRELIMINARY TOTAL (Sum of A, B and C) (max. 100)					19
-0	<input checked="" type="checkbox"/> -3%	-5%	-10%	13. Condition (From A, B, and C total)	.57
-0	<input checked="" type="checkbox"/> -25%	-50%	-75%	14. Exterior Alterations (From A, B and C total excluding 2)	4.75
D. INTEGRITY					5.32
ADJUSTED TOTAL (Preliminary total minus Integrity)					14 (rounded from 13.68)

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B) Not eligible

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 720 52nd Street _____

Name: _____

A. ARCHITECTURE

- | | | | | | |
|----|---|---|----|----------|-----------|
| 1. | Exterior/Design: <u>window groups, hipped roof, gable window</u> | E | VG | G | FP |
| 2. | Interior: <u>not evaluated</u> | E | VG | G | FP |
| 3. | Construction: <u>wood frame with wood cladding</u> | E | VG | G | FP |
| 4. | Designer/Builder: <u>arch. Thomas Dean Newsom, bldr Wm. Hammond Keifer, not sig.</u> | E | VG | G | FP |
| 5. | Style/Type: <u>modest but good example of Simple Bungalow type</u> | E | VG | G | FP |

B. HISTORY

- | | | | | | |
|-----|---|----------|----|----------|-----------|
| 6. | Person/Organization: <u>no known association with sig. person or organization</u> | E | VG | G | FP |
| 7. | Event: <u>no known assoc. with sig. event</u> | E | VG | G | FP |
| 8. | Patterns: <u>in age, style and date of constr., assoc. with residential settlement</u> | E | VG | G | FP |
| 9. | Age: <u>built 1907</u> | E | VG | G | FP |
| 10. | Site: <u>not moved</u> | E | VG | G | FP |

C. CONTEXT

- | | | | | | |
|-----|--|---|----|----------|-----------|
| 11. | Continuity: <u>maintains (rather than establishes) character of ASI</u> | E | VG | G | FP |
| 12. | Familiarity: <u>not particularly conspicuous in the neighborhood</u> | E | VG | G | FP |

D. INTEGRITY

- | | | | | | |
|-----|---|---|----------|---|---|
| 13. | Condition: <u>minor surface wear</u> | E | G | F | P |
| 14. | Exterior Alterations: <u>minor changes to character (windows replaced)</u> | E | G | F | P |

Evaluated by: Stacy Farr, Page & Turnbull Date: June 25, 2013

STATUS

Rating:

- | | | |
|----------------------------|--|---|
| City Landmark Eligibility: | <input type="checkbox"/> Eligible | <input type="checkbox"/> Not eligible |
| National Register Status: | <input type="checkbox"/> Listed | <input type="checkbox"/> In process |
| | <input type="checkbox"/> Determined eligible | <input type="checkbox"/> Appears eligible |
| | <input type="checkbox"/> Appears ineligible | |

Site of Opportunity

This evaluation sheet was accepted by the landmarks Preservation Advisory Board at its meeting of _____.

(Date)

Attest: _____

Secretary

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 720 52nd Street

Name: _____

12	6	3	0	1. Exterior/Design	
6	3	2	0	2. Interior	
6	3	2	0	3. Construction	
4	2	1	0	4. Designer/Builder	
6	3	2	0	5. Style/Type	
A. ARCHITECTURE TOTAL (max. 26)					7
30	15	8	0	6. Person/Organization	
30	15	8	0	7. Event	
18	9	5	0	8. Patterns	
8	4	2	0	9. Age	
4	2	1	0	10. Site	
B. HISTORY TOTAL (max. 60)					11
4	2	1	0	11. Continuity	
14	7	4	0	12. Familiarity	
C. CONTEXT TOTAL (max. 14)					1
PRELIMINARY TOTAL (Sum of A, B and C) (max. 100)					19
-0	-3%	-5%	-10%	13. Condition (From A, B, and C total)	.57
-0	-25%	-50%	-75%	14. Exterior Alterations (From A, B and C total excluding 2)	4.75
D. INTEGRITY					5.32
ADJUSTED TOTAL (Preliminary total minus Integrity)					14 (rounded from 13.68)

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B) Not eligible

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 671 53rd Street _____

Name: _____

A. ARCHITECTURE

- | | | | | | |
|----|---|---|----|----------|-----------|
| 1. | Exterior/Design: <u>hip roof, grouped windows, shingle clad, dormer, asymmetry</u> | E | VG | G | FP |
| 2. | Interior: <u>not evaluated</u> | E | VG | G | FP |
| 3. | Construction: <u>wood frame and shingle cladding</u> | E | VG | G | FP |
| 4. | Designer/Builder: <u>local builder Carl Phillip Kreischer</u> | E | VG | G | FP |
| 5. | Style/Type: <u>modest example of simple bungalow type</u> | E | VG | G | FP |

B. HISTORY

- | | | | | | |
|-----|--|----------|----|----------|-----------|
| 6. | Person/Organization: <u>no known association with sig. person or organization</u> | E | VG | G | FP |
| 7. | Event: <u>no known association with specific significant event</u> | E | VG | G | FP |
| 8. | Patterns: <u>representative in age, style and location of pattern of res. expansion</u> | E | VG | G | FP |
| 9. | Age: <u>constructed Aug 1906</u> | E | VG | G | FP |
| 10. | Site: <u>not moved</u> | E | VG | G | FP |

C. CONTEXT

- | | | | | | |
|-----|--|---|-----------|---|-----------|
| 11. | Continuity: <u>in ASI, good rep. in good condition, helps establish character</u> | E | VG | G | FP |
| 12. | Familiarity: <u>not particularly conspicuous in neighborhood</u> | E | VG | G | FP |

D. INTEGRITY

- | | | | | | |
|-----|---|----------|----------|---|---|
| 13. | Condition: <u>minor surface wear</u> | E | G | F | P |
| 14. | Exterior Alterations: <u>very minor changes to overall character</u> | E | G | F | P |

Evaluated by: Stacy Farr, Page & Turnbull Date: June 25, 2013

STATUS

Rating:

- | | | |
|----------------------------|--|---|
| City Landmark Eligibility: | <input type="checkbox"/> Eligible | <input type="checkbox"/> Not eligible |
| National Register Status: | <input type="checkbox"/> Listed | <input type="checkbox"/> In process |
| | <input type="checkbox"/> Determined eligible | <input type="checkbox"/> Appears eligible |
| | <input type="checkbox"/> Appears ineligible | |

Site of Opportunity

This evaluation sheet was accepted by the landmarks Preservation Advisory Board at its meeting of _____.

(Date)

Attest: _____

Secretary

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 671 53rd Street

Name: _____

12	6	<input checked="" type="checkbox"/> 3	0	1. Exterior/Design	
6	3	2	0	2. Interior	
6	3	<input checked="" type="checkbox"/> 2	0	3. Construction	
4	2	1	<input checked="" type="checkbox"/> 0	4. Designer/Builder	
6	3	<input checked="" type="checkbox"/> 2	0	5. Style/Type	
A. ARCHITECTURE TOTAL (max. 26)					7
30	15	8	<input checked="" type="checkbox"/> 0	6. Person/Organization	
30	15	8	<input checked="" type="checkbox"/> 0	7. Event	
18	9	<input checked="" type="checkbox"/> 5	0	8. Patterns	
8	4	<input checked="" type="checkbox"/> 2	0	9. Age	
<input checked="" type="checkbox"/> 4	2	1	0	10. Site	
B. HISTORY TOTAL (max. 60)					11
4	<input checked="" type="checkbox"/> 2	1	0	11. Continuity	
14	7	4	<input checked="" type="checkbox"/> 0	12. Familiarity	
C. CONTEXT TOTAL (max. 14)					2
PRELIMINARY TOTAL (Sum of A, B and C) (max. 100)					20
-0	<input checked="" type="checkbox"/> -3%	-5%	-10%	13. Condition (From A, B, and C total)	.61
<input checked="" type="checkbox"/> -0	-25%	-50%	-75%	14. Exterior Alterations (From A, B and C total excluding 2)	0
D. INTEGRITY					.61
ADJUSTED TOTAL (Preliminary total minus Integrity)					19 (rounded from 19.39)

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B) Not eligible

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 675 53rd Street

Name: _____

A. ARCHITECTURE

- | | | | | | |
|----|---|---|----|---|----|
| 1. | Exterior/Design: <u>modest size, asymmetry, hipped roof, hipped dormer, porch roof columns</u> | E | VG | G | FP |
| 2. | Interior: <u>not evaluated</u> | E | VG | G | FP |
| 3. | Construction: <u>wood frame and stucco</u> | E | VG | G | FP |
| 4. | Designer/Builder: <u>local builder Edward Collins, not significant</u> | E | VG | G | FP |
| 5. | Style/Type: <u>modest example of simple Bungalow style</u> | E | VG | G | FP |

B. HISTORY

- | | | | | | |
|-----|---|---|----|---|----|
| 6. | Person/Organization: <u>no known association with sig. person or organization</u> | E | VG | G | FP |
| 7. | Event: <u>no know association with significant event</u> | E | VG | G | FP |
| 8. | Patterns: <u>style, location and date associated with pattern of res. settlement</u> | E | VG | G | FP |
| 9. | Age: <u>1911 construction</u> | E | VG | G | FP |
| 10. | Site: <u>not moved</u> | E | VG | G | FP |

C. CONTEXT

- | | | | | | |
|-----|---|---|----|---|----|
| 11. | Continuity: <u>good but altered rep. of its type, maintains character of ASI</u> | E | VG | G | FP |
| 12. | Familiarity: <u>not conspicuous in neighborhood</u> | E | VG | G | FP |

D. INTEGRITY

- | | | | | | |
|-----|---|---|---|---|---|
| 13. | Condition: <u>minor surface wear</u> | E | G | F | P |
| 14. | Exterior Alterations: <u>addition (large semicircular bay) at primary facade</u> | E | G | F | P |

Evaluated by: Stacy Farr, Page & Turnbull Date: June 25, 2013

STATUS

Rating:

- | | | |
|----------------------------|--|---|
| City Landmark Eligibility: | <input type="checkbox"/> Eligible | <input type="checkbox"/> Not eligible |
| National Register Status: | <input type="checkbox"/> Listed | <input type="checkbox"/> In process |
| | <input type="checkbox"/> Determined eligible | <input type="checkbox"/> Appears eligible |
| | <input type="checkbox"/> Appears ineligible | |

Site of Opportunity

This evaluation sheet was accepted by the landmarks Preservation Advisory Board at its meeting of _____.

(Date)

Attest: _____

Secretary

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 675 53rd Street

Name: _____

12	6	3	0	1. Exterior/Design	
6	3	2	0	2. Interior	
6	3	2	0	3. Construction	
4	2	1	0	4. Designer/Builder	
6	3	2	0	5. Style/Type	
A. ARCHITECTURE TOTAL (max. 26)					7
30	15	8	0	6. Person/Organization	
30	15	8	0	7. Event	
18	9	5	0	8. Patterns	
8	4	2	0	9. Age	
4	2	1	0	10. Site	
B. HISTORY TOTAL (max. 60)					11
4	2	1	0	11. Continuity	
14	7	4	0	12. Familiarity	
C. CONTEXT TOTAL (max. 14)					1
PRELIMINARY TOTAL (Sum of A, B and C) (max. 100)					19
-0	-3%	-5%	-10%	13. Condition (From A, B, and C total)	.57
-0	-25%	-50%	-75%	14. Exterior Alterations (From A, B and C total excluding 2)	9.5
D. INTEGRITY					8.93
ADJUSTED TOTAL (Preliminary total minus Integrity)					9 (rounded from 8.93)

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B) Not eligible

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 677-679 53rd Street

Name: _____

A. ARCHITECTURE

- | | | | | | |
|----|---|---|----|---|----|
| 1. | Exterior/Design: <u>hip roof, symmetrical façade, engaged pilasters at entries</u> | E | VG | G | FP |
| 2. | Interior: <u>not evaluated</u> | E | VG | G | FP |
| 3. | Construction: <u>wood frame with stucco cladding</u> | E | VG | G | FP |
| 4. | Designer/Builder: <u>local builder Fred Kelley</u> | E | VG | G | FP |
| 5. | Style/Type: <u>fair example of highly simplified Classical Revival</u> | E | VG | G | FP |

B. HISTORY

- | | | | | | |
|-----|---|---|----|---|----|
| 6. | Person/Organization: <u>no known association with sig. person or organization</u> | E | VG | G | FP |
| 7. | Event: <u>no known association with significant event</u> | E | VG | G | FP |
| 8. | Patterns: <u>style reflects pattern of res. settlement, late (1921) date of construction</u> | E | VG | G | FP |
| 9. | Age: <u>1921 construction</u> | E | VG | G | FP |
| 10. | Site: <u>not moved</u> | E | VG | G | FP |

C. CONTEXT

- | | | | | | |
|-----|--|---|----|---|----|
| 11. | Continuity: <u>fair representative of type, altered, maintains char. of ASI</u> | E | VG | G | FP |
| 12. | Familiarity: <u>not particularly conspicuous in neighborhood</u> | E | VG | G | FP |

D. INTEGRITY

- | | | | | | |
|-----|--|---|---|---|---|
| 13. | Condition: <u>minor surface wear</u> | E | G | F | P |
| 14. | Exterior Alterations: <u>minor changes (first floor new windows & doors) to hist. char.</u> | E | G | F | P |

Evaluated by: Stacy Farr, Page & Turnbull Date: June 25, 2013

STATUS

Rating:

- | | | |
|----------------------------|--|---|
| City Landmark Eligibility: | <input type="checkbox"/> Eligible | <input type="checkbox"/> Not eligible |
| National Register Status: | <input type="checkbox"/> Listed | <input type="checkbox"/> In process |
| | <input type="checkbox"/> Determined eligible | <input type="checkbox"/> Appears eligible |
| | <input type="checkbox"/> Appears ineligible | |

Site of Opportunity

This evaluation sheet was accepted by the landmarks Preservation Advisory Board at its meeting of _____.

(Date)

Attest: _____

Secretary

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 677-679 53rd Street

Name: _____

12	6	<input checked="" type="checkbox"/> 3	0	1. Exterior/Design	
6	3	2	0	2. Interior	
6	3	<input checked="" type="checkbox"/> 2	0	3. Construction	
4	2	1	<input checked="" type="checkbox"/> 0	4. Designer/Builder	
6	3	2	<input checked="" type="checkbox"/> 0	5. Style/Type	
				A. ARCHITECTURE TOTAL (max. 26)	5
30	15	8	<input checked="" type="checkbox"/> 0	6. Person/Organization	
30	15	8	<input checked="" type="checkbox"/> 0	7. Event	
18	9	<input checked="" type="checkbox"/> 5	0	8. Patterns	
8	4	<input checked="" type="checkbox"/> 2	0	9. Age	
<input checked="" type="checkbox"/> 4	2	1	0	10. Site	
				B. HISTORY TOTAL (max. 60)	11
4	2	<input checked="" type="checkbox"/> 1	0	11. Continuity	
14	7	4	<input checked="" type="checkbox"/> 0	12. Familiarity	
				C. CONTEXT TOTAL (max. 14)	1
PRELIMINARY TOTAL (Sum of A, B and C) (max. 100)					17
-0	<input checked="" type="checkbox"/> -3%	-5%	-10%	13. Condition (From A, B, and C total)	.51
-0	<input checked="" type="checkbox"/> -25%	-50%	-75%	14. Exterior Alterations (From A, B and C total excluding 2)	4.25
				D. INTEGRITY	4.76
ADJUSTED TOTAL (Preliminary total minus Integrity)					12 (rounded from 12.24)

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B) Not eligible

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 685-689 53rd Street

Name: _____

A. ARCHITECTURE

- | | | | | | |
|----|---|----------|-----------|----------|-----------|
| 1. | Exterior/Design: <u>angled corner façade, multi-lite transom, curved entry hood, tile watertable</u> | E | VG | G | FP |
| 2. | Interior: <u>not evaluated</u> | E | VG | G | FP |
| 3. | Construction: <u>wood frame, stucco cladding</u> | E | VG | G | FP |
| 4. | Designer/Builder: <u>unknown</u> | E | VG | G | FP |
| 5. | Style/Type: <u>basic commercial type, no discernible style</u> | E | VG | G | FP |

B. HISTORY

- | | | | | | |
|-----|--|----------|-----------|----------|-----------|
| 6. | Person/Organization: <u>no known association with any sig. person or org.</u> | E | VG | G | FP |
| 7. | Event: <u>no known association with any significant event</u> | E | VG | G | FP |
| 8. | Patterns: <u>loc. and d.o.c. shows assoc. with res settlement, type (comm.) is supporting</u> | E | VG | G | FP |
| 9. | Age: <u>built 1914</u> | E | VG | G | FP |
| 10. | Site: <u>not moved</u> | E | VG | G | FP |

C. CONTEXT

- | | | | | | |
|-----|---|----------|-----------|----------|-----------|
| 11. | Continuity: <u>use and alterations incompatible with general character of AS</u> | E | VG | G | FP |
| 12. | Familiarity: <u>not particularly conspicuous in the neighborhood</u> | E | VG | G | FP |

D. INTEGRITY

- | | | | | | |
|-----|---|----------|----------|----------|----------|
| 13. | Condition: <u>minor surface wear</u> | E | G | F | P |
| 14. | Exterior Alterations: <u>reclad in stucco, storefront windows covered, hist. char. altered</u> | E | G | F | P |

Evaluated by: Stacy Farr, Page & Turnbull Date: June 25, 2013

STATUS

Rating:

- | | | |
|----------------------------|--|---|
| City Landmark Eligibility: | <input type="checkbox"/> Eligible | <input type="checkbox"/> Not eligible |
| National Register Status: | <input type="checkbox"/> Listed | <input type="checkbox"/> In process |
| | <input type="checkbox"/> Determined eligible | <input type="checkbox"/> Appears eligible |
| | <input type="checkbox"/> Appears ineligible | |

Site of Opportunity

This evaluation sheet was accepted by the landmarks Preservation Advisory Board at its meeting of _____.

(Date)

Attest: _____

Secretary

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 685-689 53rd Street

Name: _____

12	6	3	0	1. Exterior/Design	
6	3	2	0	2. Interior	
6	3	2	0	3. Construction	
4	2	1	0	4. Designer/Builder	
6	3	2	0	5. Style/Type	
A. ARCHITECTURE TOTAL (max. 26)					5
30	15	8	0	6. Person/Organization	
30	15	8	0	7. Event	
18	9	5	0	8. Patterns	
8	4	2	0	9. Age	
4	2	1	0	10. Site	
B. HISTORY TOTAL (max. 60)					11
4	2	1	0	11. Continuity	
14	7	4	0	12. Familiarity	
C. CONTEXT TOTAL (max. 14)					1
PRELIMINARY TOTAL (Sum of A, B and C) (max. 100)					16
-0	-3%	-5%	-10%	13. Condition (From A, B, and C total)	.48
-0	-25%	-50%	-75%	14. Exterior Alterations (From A, B and C total excluding 2)	8
D. INTEGRITY					8.48
ADJUSTED TOTAL (Preliminary total minus Integrity)					8 (rounded from 7.52)

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B) Not eligible

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 707 53rd Street

Name: _____

A. ARCHITECTURE

- | | | | | | |
|----|---|----------|-----------|----------|-----------|
| 1. | Exterior/Design: <u>good detailing (flared eaves, window groups, multi-roof forms, balconette)</u> | E | VG | G | FP |
| 2. | Interior: <u>not evaluated</u> | E | VG | G | FP |
| 3. | Construction: <u>wood frame with shingle cladding</u> | E | VG | G | FP |
| 4. | Designer/Builder: <u>local builder William A. Walker, not significant</u> | E | VG | G | FP |
| 5. | Style/Type: <u>simplified Shingle style, good example</u> | E | VG | G | FP |

B. HISTORY

- | | | | | | |
|-----|--|----------|-----------|----------|-----------|
| 6. | Person/Organization: <u>no known association with sig. person or organization</u> | E | VG | G | FP |
| 7. | Event: <u>no known association with significant event</u> | E | VG | G | FP |
| 8. | Patterns: <u>location, style & date of const. display assoc. with of pattern of res. dev.</u> | E | VG | G | FP |
| 9. | Age: <u>built 1907</u> | E | VG | G | FP |
| 10. | Site: <u>not moved</u> | E | VG | G | FP |

C. CONTEXT

- | | | | | | |
|-----|---|----------|-----------|----------|-----------|
| 11. | Continuity: <u>good rep. of type, unaltered, maintains the character of area</u> | E | VG | G | FP |
| 12. | Familiarity: <u>complex façade & roofline noticeable</u> | E | VG | G | FP |

D. INTEGRITY

- | | | | | | |
|-----|---|----------|----------|----------|----------|
| 13. | Condition: <u>only minor surface wear</u> | E | G | F | P |
| 14. | Exterior Alterations: <u>no noticeable alterations</u> | E | G | F | P |

Evaluated by: Stacy Farr, Page & Turnbull Date: June 25, 2013

STATUS

Rating:

- | | | |
|----------------------------|--|---|
| City Landmark Eligibility: | <input type="checkbox"/> Eligible | <input type="checkbox"/> Not eligible |
| National Register Status: | <input type="checkbox"/> Listed | <input type="checkbox"/> In process |
| | <input type="checkbox"/> Determined eligible | <input type="checkbox"/> Appears eligible |
| | <input type="checkbox"/> Appears ineligible | |

Site of Opportunity

This evaluation sheet was accepted by the landmarks Preservation Advisory Board at its meeting of _____.

(Date)

Attest: _____

Secretary

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 707 53rd Street

Name: _____

12	6	3	0	1. Exterior/Design	
6	3	2	0	2. Interior	
6	3	2	0	3. Construction	
4	2	1	0	4. Designer/Builder	
6	3	2	0	5. Style/Type	
A. ARCHITECTURE TOTAL (max. 26)					7
30	15	8	0	6. Person/Organization	
30	15	8	0	7. Event	
18	9	5	0	8. Patterns	
8	4	2	0	9. Age	
4	2	1	0	10. Site	
B. HISTORY TOTAL (max. 60)					11
4	2	1	0	11. Continuity	
14	7	4	0	12. Familiarity	
C. CONTEXT TOTAL (max. 14)					5
PRELIMINARY TOTAL (Sum of A, B and C) (max. 100)					23
-0	-3%	-5%	-10%	13. Condition (From A, B, and C total)	.69
-0	-25%	-50%	-75%	14. Exterior Alterations (From A, B and C total excluding 2)	0
D. INTEGRITY					.69
ADJUSTED TOTAL (Preliminary total minus Integrity)					22 (rounded from 22.31)

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B) Not eligible

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 715 53rd Street

Name: _____

A. ARCHITECTURE

- | | | | | | |
|----|---|---|----|----------|-----------|
| 1. | Exterior/Design: <u>flared eaves, multi-lite dormer window, asymmetry, exp. purlins & rafter tails</u> | E | VG | G | FP |
| 2. | Interior: <u>not evaluated</u> | E | VG | G | FP |
| 3. | Construction: <u>wood frame with wood clapboard siding</u> | E | VG | G | FP |
| 4. | Designer/Builder: <u>unknown</u> | E | VG | G | FP |
| 5. | Style/Type: <u>modest but good example of Craftsman bungalow</u> | E | VG | G | FP |

B. HISTORY

- | | | | | | |
|-----|--|----------|-----------|----------|-----------|
| 6. | Person/Organization: <u>no known association with sig. person or organization</u> | E | VG | G | FP |
| 7. | Event: <u>no known association with significant event</u> | E | VG | G | FP |
| 8. | Patterns: <u>assoc. (loc, style and date of const.) with pattern of res. settlement</u> | E | VG | G | FP |
| 9. | Age: <u>ca. 1906</u> | E | VG | G | FP |
| 10. | Site: <u>not moved</u> | E | VG | G | FP |

C. CONTEXT

- | | | | | | |
|-----|--|---|----|----------|-----------|
| 11. | Continuity: <u>good rep. of type, few alterations, maintains character of ASI</u> | E | VG | G | FP |
| 12. | Familiarity: <u>not particularly conspicuous in neighborhood</u> | E | VG | G | FP |

D. INTEGRITY

- | | | | | | |
|-----|--|---|----------|---|---|
| 13. | Condition: <u>minor surface wear</u> | E | G | F | P |
| 14. | Exterior Alterations: <u>new porch supports & railings, new</u> | E | G | F | P |

Evaluated by: Stacy Farr, Page & Turnbull Date: June 25, 2013

STATUS

Rating:

- | | | |
|----------------------------|--|---|
| City Landmark Eligibility: | <input type="checkbox"/> Eligible | <input type="checkbox"/> Not eligible |
| National Register Status: | <input type="checkbox"/> Listed | <input type="checkbox"/> In process |
| | <input type="checkbox"/> Determined eligible | <input type="checkbox"/> Appears eligible |
| | <input type="checkbox"/> Appears ineligible | |

Site of Opportunity

This evaluation sheet was accepted by the landmarks Preservation Advisory Board at its meeting of _____.

(Date)

Attest: _____

Secretary

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 715 53rd Street

Name: _____

12	6	<input checked="" type="checkbox"/> 3	0	1. Exterior/Design	
6	3	2	0	2. Interior	
6	3	<input checked="" type="checkbox"/> 2	0	3. Construction	
4	2	1	<input checked="" type="checkbox"/> 0	4. Designer/Builder	
6	3	<input checked="" type="checkbox"/> 2	0	5. Style/Type	
A. ARCHITECTURE TOTAL (max. 26)					7
30	15	8	<input checked="" type="checkbox"/> 0	6. Person/Organization	
30	15	8	<input checked="" type="checkbox"/> 0	7. Event	
18	9	<input checked="" type="checkbox"/> 5	0	8. Patterns	
8	<input checked="" type="checkbox"/> 4	2	0	9. Age	
<input checked="" type="checkbox"/> 4	2	1	0	10. Site	
B. HISTORY TOTAL (max. 60)					13
4	2	<input checked="" type="checkbox"/> 1	0	11. Continuity	
14	7	4	<input checked="" type="checkbox"/> 0	12. Familiarity	
C. CONTEXT TOTAL (max. 14)					1
PRELIMINARY TOTAL (Sum of A, B and C) (max. 100)					21
-0	<input checked="" type="checkbox"/> -3%	-5%	-10%	13. Condition (From A, B, and C total)	.63
-0	<input checked="" type="checkbox"/> -25%	-50%	-75%	14. Exterior Alterations (From A, B and C total excluding 2)	5.25
D. INTEGRITY					5.88
ADJUSTED TOTAL (Preliminary total minus Integrity) 15 (rounded from 15.12)					

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B) Not eligible

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 5203 Dover Street

Name: _____

A. ARCHITECTURE

- | | | | | | |
|----|---|---|----|---------------------------------------|----|
| 1. | Exterior/Design: <u>hipped roof & dormer, multi-lite dormer window, gable porch roof, Tuscan porch columns</u> | E | VG | <input checked="" type="checkbox"/> G | FP |
| 2. | Interior: <u>not evaluated</u> | E | VG | <input type="checkbox"/> G | FP |
| 3. | Construction: <u>wood frame with wood clapboard siding</u> | E | VG | <input checked="" type="checkbox"/> G | FP |
| 4. | Designer/Builder: <u>unknown</u> | E | VG | <input type="checkbox"/> G | FP |
| 5. | Style/Type: <u>modest but good example of Bungalow style</u> | E | VG | <input checked="" type="checkbox"/> G | FP |

B. HISTORY

- | | | | | | |
|-----|--|---------------------------------------|--|---------------------------------------|----|
| 6. | Person/Organization: <u>no known association with sig. person or organization</u> | E | VG | <input type="checkbox"/> G | FP |
| 7. | Event: <u>no known association with significant event</u> | E | VG | <input type="checkbox"/> G | FP |
| 8. | Patterns: <u>age, location and date of const. assoc. with pattern of res. development</u> | E | VG | <input checked="" type="checkbox"/> G | FP |
| 9. | Age: <u>constructed 1905</u> | E | <input checked="" type="checkbox"/> VG | <input type="checkbox"/> G | FP |
| 10. | Site: <u>not moved</u> | <input checked="" type="checkbox"/> E | VG | <input type="checkbox"/> G | FP |

C. CONTEXT

- | | | | | | |
|-----|---|---|----|---------------------------------------|----|
| 11. | Continuity: <u>maintains character of ASI</u> | E | VG | <input checked="" type="checkbox"/> G | FP |
| 12. | Familiarity: <u>not particularly distinguishable in the neighborhood</u> | E | VG | <input type="checkbox"/> G | FP |

D. INTEGRITY

- | | | | | | |
|-----|---|---|---------------------------------------|----------------------------|----------------------------|
| 13. | Condition: <u>exhibits only minor surface wear</u> | E | <input checked="" type="checkbox"/> G | <input type="checkbox"/> F | <input type="checkbox"/> P |
| 14. | Exterior Alterations: <u>minor changes to character (windows replaced)</u> | E | <input checked="" type="checkbox"/> G | <input type="checkbox"/> F | <input type="checkbox"/> P |

Evaluated by: Stacy Farr, Page & Turnbull

Date: June 25, 2013

STATUS

Rating:

- | | | |
|----------------------------|--|---|
| City Landmark Eligibility: | <input type="checkbox"/> Eligible | <input type="checkbox"/> Not eligible |
| National Register Status: | <input type="checkbox"/> Listed | <input type="checkbox"/> In process |
| | <input type="checkbox"/> Determined eligible | <input type="checkbox"/> Appears eligible |
| | <input type="checkbox"/> Appears ineligible | |

Site of Opportunity

This evaluation sheet was accepted by the landmarks Preservation Advisory Board at its meeting of _____.

(Date)

Attest: _____

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 5203 Dover Street

Name: _____

12	6	<input checked="" type="checkbox"/> 3	0	1. Exterior/Design	
6	3	2	0	2. Interior	
6	3	<input checked="" type="checkbox"/> 2	0	3. Construction	
4	2	1	<input checked="" type="checkbox"/> 0	4. Designer/Builder	
6	3	<input checked="" type="checkbox"/> 2	0	5. Style/Type	
				A. ARCHITECTURE TOTAL (max. 26)	7
30	15	8	<input checked="" type="checkbox"/> 0	6. Person/Organization	
30	15	8	<input checked="" type="checkbox"/> 0	7. Event	
18	9	<input checked="" type="checkbox"/> 5	0	8. Patterns	
8	<input checked="" type="checkbox"/> 4	2	0	9. Age	
<input checked="" type="checkbox"/> 4	2	1	0	10. Site	
				B. HISTORY TOTAL (max. 60)	13
4	2	<input checked="" type="checkbox"/> 1	0	11. Continuity	
14	7	4	<input checked="" type="checkbox"/> 0	12. Familiarity	
				C. CONTEXT TOTAL (max. 14)	1
PRELIMINARY TOTAL (Sum of A, B and C) (max. 100)					21
-0	<input checked="" type="checkbox"/> -3%	-5%	-10%	13. Condition (From A, B, and C total)	.63
-0	<input checked="" type="checkbox"/> -25%	-50%	-75%	14. Exterior Alterations (From A, B and C total excluding 2)	5.25
				D. INTEGRITY	5.88
ADJUSTED TOTAL (Preliminary total minus Integrity)					15 (rounded from 15.12)

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B) Not eligible

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 5212-5214 Dover Street

Name: _____

A. ARCHITECTURE

- | | | | | | |
|----|--|---|----|---|----|
| 1. | Exterior/Design: <u>any original design and detail lost to alterations & façade reconfiguration</u> | E | VG | G | FP |
| 2. | Interior: <u>not evaluated</u> | E | VG | G | FP |
| 3. | Construction: <u>wood frame, wood and stucco cladding</u> | E | VG | G | FP |
| 4. | Designer/Builder: <u>local contractor Harry M. Swalley, not significant</u> | E | VG | G | FP |
| 5. | Style/Type: <u>exhibits no discernible style or type</u> | E | VG | G | FP |

B. HISTORY

- | | | | | | |
|-----|---|---|----|---|----|
| 6. | Person/Organization: <u>no known association with sig. person or organization</u> | E | VG | G | FP |
| 7. | Event: <u>no known association with significant event</u> | E | VG | G | FP |
| 8. | Patterns: <u>assoc. in date of const. and location with pattern of res. settlement</u> | E | VG | G | FP |
| 9. | Age: <u>built 1910</u> | E | VG | G | FP |
| 10. | Site: <u>not moved</u> | E | VG | G | FP |

C. CONTEXT

- | | | | | | |
|-----|---|---|----|---|----|
| 11. | Continuity: <u>located in ASI but visually noncontributory</u> | E | VG | G | FP |
| 12. | Familiarity: <u>not particularly conspicuous in the neighborhood</u> | E | VG | G | FP |

D. INTEGRITY

- | | | | | | |
|-----|---|---|---|---|---|
| 13. | Condition: <u>minor surface wear</u> | E | G | F | P |
| 14. | Exterior Alterations: <u>façade reconfigured, new cladding, porch, and windows</u> | E | G | F | P |

Evaluated by: Stacy Farr, Page & Turnbull Date: June 25, 2013

STATUS

Rating:

- | | | |
|----------------------------|--|---|
| City Landmark Eligibility: | <input type="checkbox"/> Eligible | <input type="checkbox"/> Not eligible |
| National Register Status: | <input type="checkbox"/> Listed | <input type="checkbox"/> In process |
| | <input type="checkbox"/> Determined eligible | <input type="checkbox"/> Appears eligible |
| | <input type="checkbox"/> Appears ineligible | |

Site of Opportunity

This evaluation sheet was accepted by the landmarks Preservation Advisory Board at its meeting of _____.

(Date)

Attest: _____

Secretary

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 5212-5214 Dover Street

Name: _____

12	6	3	0	1. Exterior/Design	
6	3	2	0	2. Interior	
6	3	2	0	3. Construction	
4	2	1	0	4. Designer/Builder	
6	3	2	0	5. Style/Type	
A. ARCHITECTURE TOTAL (max. 26)					2
30	15	8	0	6. Person/Organization	
30	15	8	0	7. Event	
18	9	5	0	8. Patterns	
8	4	2	0	9. Age	
4	2	1	0	10. Site	
B. HISTORY TOTAL (max. 60)					11
4	2	1	0	11. Continuity	
14	7	4	0	12. Familiarity	
C. CONTEXT TOTAL (max. 14)					0
PRELIMINARY TOTAL (Sum of A, B and C) (max. 100)					13
-0	-3%	-5%	-10%	13. Condition (From A, B, and C total)	.39
-0	-25%	-50%	-75%	14. Exterior Alterations (From A, B and C total excluding 2)	6.5
D. INTEGRITY					6.11
ADJUSTED TOTAL (Preliminary total minus Integrity) 6 (rounded from 6.11)					

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B) Not eligible

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 5225 Dover Street

Name: _____

A. ARCHITECTURE

- | | | | | | |
|----|--|---|----|----------|-----------|
| 1. | Exterior/Design: <u>roof brackets, lattice at gable peaks, stylized corner posts, window groups</u> | E | VG | G | FP |
| 2. | Interior: <u>not evaluated</u> | E | VG | G | FP |
| 3. | Construction: <u>wood frame construction</u> | E | VG | G | FP |
| 4. | Designer/Builder: <u>local builder Harry M. Swalley</u> | E | VG | G | FP |
| 5. | Style/Type: <u>example of Craftsman style</u> | E | VG | G | FP |

B. HISTORY

- | | | | | | |
|-----|--|----------|----|----------|-----------|
| 6. | Person/Organization: <u>no known association with sig. person or organization</u> | E | VG | G | FP |
| 7. | Event: <u>no known association with significant event</u> | E | VG | G | FP |
| 8. | Patterns: <u>assoc. with pattern of res development in style, loc. and date of const.</u> | E | VG | G | FP |
| 9. | Age: <u>built 1908</u> | E | VG | G | FP |
| 10. | Site: <u>not moved</u> | E | VG | G | FP |

C. CONTEXT

- | | | | | | |
|-----|--|---|----|----------|-----------|
| 11. | Continuity: <u>maintains (rather than establishes) character of ASI</u> | E | VG | G | FP |
| 12. | Familiarity: <u>not particularly conspicuous in the neighborhood</u> | E | VG | G | FP |

D. INTEGRITY

- | | | | | | |
|-----|--|---|----------|---|---|
| 13. | Condition: <u>minor surface wear</u> | E | G | F | P |
| 14. | Exterior Alterations: <u>changes (new windows, cladding, entrances) minor</u> | E | G | F | P |

Evaluated by: Stacy Farr, Page & Turnbull Date: June 25, 2013

STATUS

Rating:

- | | | |
|----------------------------|--|---|
| City Landmark Eligibility: | <input type="checkbox"/> Eligible | <input type="checkbox"/> Not eligible |
| National Register Status: | <input type="checkbox"/> Listed | <input type="checkbox"/> In process |
| | <input type="checkbox"/> Determined eligible | <input type="checkbox"/> Appears eligible |
| | <input type="checkbox"/> Appears ineligible | |

Site of Opportunity

This evaluation sheet was accepted by the landmarks Preservation Advisory Board at its meeting of _____.

(Date)

Attest: _____

Secretary

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 5225 Dover Street

Name: _____

12	6	<input checked="" type="checkbox"/> 3	0	1. Exterior/Design	
6	3	2	0	2. Interior	
6	3	<input checked="" type="checkbox"/> 2	0	3. Construction	
4	2	1	<input checked="" type="checkbox"/> 0	4. Designer/Builder	
6	3	<input checked="" type="checkbox"/> 2	0	5. Style/Type	
A. ARCHITECTURE TOTAL (max. 26)					7
30	15	8	<input checked="" type="checkbox"/> 0	6. Person/Organization	
30	15	8	<input checked="" type="checkbox"/> 0	7. Event	
18	9	<input checked="" type="checkbox"/> 5	0	8. Patterns	
8	4	<input checked="" type="checkbox"/> 2	0	9. Age	
<input checked="" type="checkbox"/> 4	2	1	0	10. Site	
B. HISTORY TOTAL (max. 60)					11
4	2	<input checked="" type="checkbox"/> 1	0	11. Continuity	
14	7	4	<input checked="" type="checkbox"/> 0	12. Familiarity	
C. CONTEXT TOTAL (max. 14)					1
PRELIMINARY TOTAL (Sum of A, B and C) (max. 100)					19
-0	<input checked="" type="checkbox"/> -3%	-5%	-10%	13. Condition (From A, B, and C total)	.57
-0	-25%	<input checked="" type="checkbox"/> -50%	-75%	14. Exterior Alterations (From A, B and C total excluding 2)	9.5
D. INTEGRITY					10.07
ADJUSTED TOTAL (Preliminary total minus Integrity)					8 (rounded from 8.3)

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B) Not eligible

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 5204 Martin Luther King Jr. Way

Name: _____

A. ARCHITECTURE

- | | | | | | |
|----|--|----------|-----------|----------|-----------|
| 1. | Exterior/Design: <u>arched windows, molded rosettes, spiral columns, iron balconettes</u> | E | VG | G | FP |
| 2. | Interior: <u>not evaluated</u> | E | VG | G | FP |
| 3. | Construction: <u>wood frame construction</u> | E | VG | G | FP |
| 4. | Designer/Builder: <u>Unknown</u> | E | VG | G | FP |
| 5. | Style/Type: <u>modest example of Mediterranean Revival style</u> | E | VG | G | FP |

B. HISTORY

- | | | | | | |
|-----|--|----------|-----------|----------|-----------|
| 6. | Person/Organization: <u>no known association with sig. person or organization</u> | E | VG | G | FP |
| 7. | Event: <u>no known association with significant event</u> | E | VG | G | FP |
| 8. | Patterns: <u>assoc. with pattern of res development in style, loc. and date of const.</u> | E | VG | G | FP |
| 9. | Age: <u>built 1920s</u> | E | VG | G | FP |
| 10. | Site: <u>not moved</u> | E | VG | G | FP |

C. CONTEXT

- | | | | | | |
|-----|--|----------|-----------|----------|-----------|
| 11. | Continuity: <u>maintains (rather than establishes) character of ASI; now isolated amidst new construction</u> | E | VG | G | FP |
| 12. | Familiarity: <u>not particularly conspicuous in the neighborhood</u> | E | VG | G | FP |

D. INTEGRITY

- | | | | | | |
|-----|---|----------|----------|----------|----------|
| 13. | Condition: <u>minor surface wear</u> | E | G | F | P |
| 14. | Exterior Alterations: <u>changes appear very minor</u> | E | G | F | P |

Evaluated by: Christina Dikas, Page & Turnbull **Date:** June 28, 2013

STATUS

Rating:

- | | | |
|----------------------------|--|---|
| City Landmark Eligibility: | <input type="checkbox"/> Eligible | <input type="checkbox"/> Not eligible |
| National Register Status: | <input type="checkbox"/> Listed | <input type="checkbox"/> In process |
| | <input type="checkbox"/> Determined eligible | <input type="checkbox"/> Appears eligible |
| | <input type="checkbox"/> Appears ineligible | |
| Site of Opportunity | <input type="checkbox"/> | |

This evaluation sheet was accepted by the landmarks Preservation Advisory Board at its meeting of _____.

(Date)

Attest: _____

**City of Oakland – Landmarks Preservation Advisory Board
EVALUATION TALLY SHEET FOR LANDMARK ELIGIBILITY**

Preliminary Final

Address: 5204 Martin Luther King Jr. Way

Name: _____

12	6	<input checked="" type="checkbox"/> 3	0	1. Exterior/Design	
6	3	2	0	2. Interior	
6	3	<input checked="" type="checkbox"/> 2	0	3. Construction	
4	2	1	<input checked="" type="checkbox"/> 0	4. Designer/Builder	
6	3	<input checked="" type="checkbox"/> 2	0	5. Style/Type	
				A. ARCHITECTURE TOTAL (max. 26)	7
30	15	8	<input checked="" type="checkbox"/> 0	6. Person/Organization	
30	15	8	<input checked="" type="checkbox"/> 0	7. Event	
18	9	<input checked="" type="checkbox"/> 5	0	8. Patterns	
8	4	<input checked="" type="checkbox"/> 2	0	9. Age	
<input checked="" type="checkbox"/> 4	2	1	0	10. Site	
				B. HISTORY TOTAL (max. 60)	11
4	2	<input checked="" type="checkbox"/> 1	0	11. Continuity	
14	7	4	<input checked="" type="checkbox"/> 0	12. Familiarity	
				C. CONTEXT TOTAL (max. 14)	1
PRELIMINARY TOTAL (Sum of A, B and C) (max. 100)					19
-0	<input checked="" type="checkbox"/> -3%	-5%	-10%	13. Condition (From A, B, and C total)	.57
<input checked="" type="checkbox"/> -0	-25%	-50%	-75%	14. Exterior Alterations (From A, B and C total excluding 2)	0
				D. INTEGRITY	.57
ADJUSTED TOTAL (Preliminary total minus Integrity)					18 (rounded from 18.43)

STATUS/RATING

Present Rating (Adjusted Total): A(35+) B(23-34) C(11-22) D(0-10)

Contingency Rating (Preliminary Total): A(35+) B(23-34) C(11-22) D(0-10)

City Landmark Eligibility: Eligible (Present Rating is A or B) Not eligible

ARCHITECTURE
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BUILDING TECHNOLOGY

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