

United States Department of the Interior
National Park Service

National Register of Historic Places Registration Form



This form is for use in nominating or requesting determinations for individual properties and districts. See instructions in *How to Complete the National Register of Historic Places Registration Form* (National Register Bulletin 16A). Complete each item by marking "x" in the appropriate box or by entering the information requested. If any item does not apply to the property being documented, enter "N/A" for "not applicable." For functions, architectural classification, materials, and areas of significance, enter only categories and subcategories from the instructions. Place additional entries and narrative items on continuation sheets (NPS Form 10-900a). Use a typewriter, word processor, or computer, to complete all items.

1. Name of Property

Historic name MEDICAL DENTAL BUILDING

Other names/site number _____

2. Location

street & number 509 Olive Way not for publication

city or town Seattle vicinity

State Washington code WA county King code 033 zip code 98101

3. State/Federal Agency Certification

As the designated authority under the National Historic Preservation Act of 1986, as amended, I hereby certify that this nomination request for determination of eligibility meets the documentation standards for registering properties in the National Register of Historic Places and meets the procedural and professional requirements set forth in 36 CFR Part 60. In my opinion, the property meets does not meet the National Register criteria. I recommend that this property be considered significant nationally statewide locally. (See continuation sheet for additional comments.)

[Signature]
Signature of certifying official/Title

3-23-06
Date

WASHINGTON STATE HISTORIC PRESERVATION OFFICE
State or Federal agency and bureau

In my opinion, the property meets does not meet the National Register criteria. (See continuation sheet for additional comments.)

Signature of certifying official/Title

Date

State or Federal agency and bureau

4. National Park Service Certification

I, hereby, certify that this property is:

- entered in the National Register.
See continuation sheet
- determined eligible for the National Register.
See continuation sheet
- determined not eligible for the National Register.
- removed from the National Register.
- other (explain:)

Signature of the Keeper

Date of Action

[Signature]

5/12/06

5. Classification

Ownership of Property
(Check as many boxes as apply)

- private
- public-local
- public-State
- public-Federal

Category of Property
(Check only one box)

- building(s)
- district
- site
- structure
- object

Number of Resources within Property
(Do not incl. previously listed resources in the count.)

Contributing	Non-Contributing	
1		buildings
		sites
		structures
		objects
1		Total

Name of related multiple property listing:
(Enter "N/A" if property is not part of a multiple property listing.)

NA _____

Number of contributing resources previously listed in the National Register

NONE _____

6. Functions or Use

Historic Functions
(Enter categories from instructions)

HEALTH CARE/clinic _____
 COMMERCE/TRADE/specialty stores _____

Current Functions
(Enter categories from instructions)

HEALTH CARE/clinic _____
 COMMERCE/TRADE/specialty stores _____

7. Description

Architectural Classification
(Enter categories from instructions)

LATE 19th & 20th CENTURY REVIVALS/Late Gothic _____
 Revival _____
 MODERN MOVEMENT/ Moderne _____

Materials
(Enter categories from instructions)

foundation CONCRETE _____
 walls TERRA COTTA _____

 roof _____
 other TERRA COTTA, GRANITE, ALUMINUM _____

Narrative Description

(Describe the historic and current condition of the property.)

SEE CONTINUATION SHEET

8. Statement of Significance

Applicable National Register Criteria

(Mark "x" in one or more boxes for the criteria qualifying the property for National Register listing.)

- A** Property is associated with events that have made a significant contribution to the broad patterns of our history.
- B** Property is associated with the lives of persons significant in our past.
- C** Property embodies the distinctive characteristics of a type, period, or method of construction or represents the work of a master, or possesses high artistic values, or represents a significant and distinguishable entity whose components lack individual distinction.
- D** Property has yielded, or is likely to yield, information important in prehistory or history.

Criteria Considerations

(Mark "x" in all the boxes that apply.)

Property is:

- A** owned by a religious institution or used for religious purposes.
- B** removed from its original location.
- C** a birthplace or grave.
- D** a cemetery.
- E** a reconstructed building, object, or structure.
- F** a commemorative property.
- G** less than 50 years old or achieving significance within the past 50 years.

Areas of Significance

(Enter categories from instructions)

HEALTH/MEDICINE

ARCHITECTURE

Period of Significance

1925-1950

Significant Dates

1925

1950

Significant Person

(Complete if Criterion B is marked above)

Cultural Affiliation

Architect/Builder

Creutzer, John A. (Architect)

Albertson, A.H. (Architect)

A.W. Quist Company (Builder)

Fey, William Henry (Architect)

Narrative Statement of Significance

(Explain the significance of the property.) **SEE CONTINUATION SHEET**

9. Major Bibliographical References

Bibliography

(Cite the books, articles, and other sources used in preparing this form.) **SEE CONTINUATION SHEET**

Previous documentation on file (NPS):

- preliminary determination of individual listing (36 CFR 67) has been requested
- previously listed in the National Register
- previously determined eligible by the National Register
- designated a National Historic Landmark
- # _____
- recorded by Historic American Engineering
- Record# _____

Primary location of additional data:

- State Historic Preservation Office
- Other State agency
- Federal agency
- Local government
- University
- Other

Name of repository:

University of Washington Libraries:
Manuscripts, Special Collections and
University Archives

10. Geographical Data**Acreege of Property**

Less than one acre

UTM References

(Place additional UTM References on a continuation sheet.)

1	<input type="text" value="10"/> Zone	<input type="text" value="5"/> <input type="text" value="49"/> <input type="text" value="834"/> Easting	<input type="text" value="52"/> <input type="text" value="73"/> <input type="text" value="482"/> Northing	3	<input type="text"/> Zone	<input type="text"/> <input type="text"/> <input type="text"/> Easting	<input type="text"/> <input type="text"/> <input type="text"/> Northing
2	<input type="text"/> Zone	<input type="text"/> <input type="text"/> <input type="text"/> Easting	<input type="text"/> <input type="text"/> <input type="text"/> Northing	4	<input type="text"/> Zone	<input type="text"/> <input type="text"/> <input type="text"/> Easting	<input type="text"/> <input type="text"/> <input type="text"/> Northing

Verbal Boundary Description

(Describe the boundaries of the property.)

See continuation sheet.

Boundary Justification

(Explain why the boundaries were selected.)

See continuation sheet.

11. Form Prepared By

name/title	<u>Mildred Tanner Andrews, Historian</u>	date	<u>October 10, 2005</u>
organization	<u></u>	date	<u></u>
street & number	<u>851 NE 56th Street</u>	telephone	<u>206-524-1426</u>
city or town	<u>Seattle</u>	state	<u>WA</u> zip code <u>98105</u>

Additional Documentation

Submit the following items with the completed form:

Continuation Sheets**Maps**A **USGS map** (7.5 or 15 minute series) indicating the property's location.A **Sketch map** for historic districts and properties having large acreage or numerous resources.**Photographs**Representative **black and white photographs** of the property.**Additional items**

(Check with the SHPO or FPO for any additional items.)

Property Owner (Complete this item at the request of the SHPO or FPO.)

name	<u>GRE Medical Dental Building LLC (George Petrie, Contact)</u>		
street & number	<u>2801 Alaskan Way, Suite 200</u>	telephone	<u>(206) 215-9789</u>
city or town	<u>Seattle</u>	state	<u>WA</u> zip code <u>98121</u>

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National Register of Historic Places Continuation Sheet -

MEDICAL DENTAL BUILDING
SEATTLE, WASHINGTON

Section number 7 Page 1 of 5

Narrative Description:

Overview and Site Context

The Medical Dental Building is an eighteen-story, concrete-frame high-rise constructed in 1925 and later expanded with a fourteen-story addition in 1950. It is composed of a two-story base with "U" shaped tower above, with the northeast half of the "U" added in 1950. Each of the two distinct halves of the building reflects its respective architectural era, although the first and second floors were altered significantly with the 1950 addition.

The 1925 building was originally conceived by doctors who wanted to establish a "real medical center in Seattle."¹ Initially owned by the Bradner Building Company, and named the Medical and Dental Building; it was designed by Seattle architect John A. Creuzter in consultation with A.H. Albertson. It was constructed in less than a year by the A.W. Quist Company. It included medical offices for a wide range of physicians and dentists, with specific suites designed and constructed for them as a part of the original building construction. In addition, the building included amenities such as a seventeenth floor meeting room and basement-level parking garage, auditorium, locker rooms, and library.²

The building is located in downtown Seattle at the intersection of Olive Way between Fifth and Sixth Avenues and situated directly north of the Frederick and Nelson Department Store (now Nordstrom). The first two stories occupy the entire 256-foot width of the northwest end of the block to a depth of 100 feet. The remaining sixteen floors of the 1925 highrise tower occupy the west half of the site in a modified "L" shaped configuration. In accordance with the doctors' expansion plans, the northeast half of the site above the second floor was left undeveloped for the future addition, which completed the "U" shape that exists today.

1925 Building - Structure and Exterior

The 1925 building is constructed of octagonal, cast-in-place, reinforced concrete columns with concrete floor slabs over concrete pan joists spaced on 24" centers. The exterior facades facing the street consist of terra-cotta cladding over hollow clay tile wall infill on the southwest, northwest and northeast faces. The exterior façades facing southeast are Portland cement plaster over hollow-clay-tile wall infill. The first two floors occupy the entire site. Floors three through sixteen occupy the west half of the site and are "L"-shaped with a beveled corner that follows the property line. The seventeenth and eighteenth floors are stepped back to create a central tower form.

The building's architectural elements and organization are clearly influenced by the earlier Gothic Revival movement, and are executed in a "warm white" glazed architectural terra-cotta cladding, manufactured by the Washington Brick, Lime & Sewer Pipe Company of Clayton, Washington.³

The tripartite façade consists of a two-story base, supporting the vertically-ribbed, fourteen story central block, topped with an ornate multi-storied "cornice" and tower. The two story base was originally constructed with slightly recessed bays, marked by full height terra-cotta clad columns and polished granite bases. Each ground floor retail storefront had a black and gold marble base, with large wood-framed display windows and door, and clerestory windows above. Directly above, the second floor offices had a single full-bay, elliptical-arched, plate-glass window

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Narrative Description: (Continued)

and ornamental terra-cotta spandrel panel. This two-story base was subsequently modified over the years, including a complete replacement of the terra cotta, wood storefront and second floor wood windows in the 1950 renovation,⁴ as well as various subsequent modifications. The entry marquee was an ornate cast-iron and steel structure, chain hung from the façade. It is unclear when this was removed, as it appears to have remained on the building as late as 1951.

The rhythm of the building's original base is translated into the stories above with continuous projecting, ribbed terra-cotta pilasters. Each bay is further subdivided with a single vertical element, flanked by individual wood windows on both sides, with one-over-one sashes. The vertical ribbons of windows are broken at each floor line with an ornamental terra-cotta spandrel panel. The basic design utilized at floors five through fourteen is a simple insert with foiled corners. More ornate spandrel panels, employing a tracery pattern and central medallion, are featured at floors four and fifteen.

The main building volume is capped by a decorative banding above the fifteenth floor. This element hides an interstitial "plumbing attic" between floors fifteen and sixteen, and acts as a roof parapet where the building floors begin to set back from the perimeter. The primary and secondary terra-cotta pilasters at the building perimeter project above the coping and are capped with domes and finials. Between the pilasters, the banding is articulated with coupled, foliated ogee arches, crowned with paired quatrefoils; a motif repeated again at the main tower. With the exception of some upper floor window sashes that have been replaced by louvers, the 1925 exterior remains intact at floors three through eighteen.

1925 Building - Interior

The first floor lobby, like the exterior, was originally executed in 1925 with Gothic Revival style detailing. The entry sequence began with an exterior vestibule, recessed one bay into the building. Its terra-cotta and polished granite-wrapped columns, elliptical arched clerestory and wood entry doors reflected the detailing on the exterior façade. The vestibule floor was Pink Tennessee marble, and the ceiling a gothic inspired, plaster tracery pattern, both of which continued into the elevator lobby beyond. A Tennessee Throsher Grey⁵ marble wainscot, approximately seven feet high, wrapped the elevator lobby with raised ornate plaster arches, placed above each pair of elevator doors. A letterbox with decorative metal exterior was placed north of the elevators. It is still functioning today. In the 1950 renovation, the exterior recessed vestibule was absorbed into the building interior and was stripped of wood doors, terra cotta, granite and plaster detailing.⁶ The plaster ceiling and elevator doors were also removed. The marble wainscot is still intact at the elevator lobby, and the marble floor may remain below the current tile and carpet overlays, but its condition is not known. The building was originally constructed with only the four elevator cabs on the southwest side of the elevator lobby. Their original interior finishes no longer exist.

A main stair tower is located at the southeast end of the elevator lobby and extends the entire height of the building, connecting to each of the upper floor lobbies and the eighteenth floor dental school and meeting room. The tower is concrete with hollow clay tile infill and has a painted plaster finish at the interior. It is rectangular in shape at the basement, first and second floors. It is half octagon in shape at the remaining upper floors with a corresponding cast-iron and steel stair of the same geometry. The stair exhibits architectural detailing in a style consistent with the

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Narrative Description: (Continued)

building exterior. It is open full height from floors one through eighteen and is naturally lit from floors three through eighteen by the southeast light court. There are three steel sash windows wrapping each floor to floor run, except at the fifteenth floor, which has three lancet windows with cusped arches. The original doors that led from the first floor lobby to the stair have been removed and replaced by a new solid steel door at a different location. At the upper floors, the original painted steel and glass fire doors with wood casing, that lead from elevator lobby to the stair, are intact.

The upper floor lobbies are more simply appointed than the ground floor lobby. The walls are mostly gypsum plaster over hollow clay tile, with vertical panels made from applied, painted wood molding. The terrazzo floor and marble tile border are currently covered with carpet.

The corridors at each floor typically have an "L"-shaped configuration, following the angle of the building exterior, except at floors five, ten, twelve and sixteen, where the corridor has been truncated. The corridor at the ninth floor was removed in its entirety as part of a full floor interior demolition by the previous owner. Toilet rooms are typically located at the bend in the "L", but some have been modified or removed. The corridor walls are typically constructed with hollow-clay tile and plaster block and finished in gypsum plaster. The original plaster ceiling has been covered with acoustic tile, adhered directly to the plaster. There is painted wood door casing at most doors, painted wood cable tray near the ceiling and granite base. The original wood doors have been almost entirely replaced and suite entries have been added over the years, some of which include vestibules at the corridor.

With a few exceptions, none of the original building fabric in the tenant suites is intact. The eighteenth floor dental school still exists and has some stained mahogany paneling and door trim that appears to date from 1925. The hospital, which was originally located on the sixth floor, then relocated to the third floor in 1949, no longer exists. It is known that a cafeteria existed on the second floor, but it is not known whether the current cafeteria operates in the same location. The current cafeteria does not contain any historic detailing.

The basement of the building is constructed of concrete columns with concrete exterior walls and plaster finished hollow-clay tile interior walls. It had multiple functions, according to a drawing in the 1924 building plans. The south and east portions of the floor were designed for use as a parking garage with access via a ramp off of Sixth Avenue. The central stair and elevator lobby served as access to the garage as well as an auditorium, kitchen, library and committee rooms to the north and west sides. The access ramp and garage remain. The auditorium and kitchen have been removed and the space is now used for parking. Only the decorative plaster column ornaments remain in the auditorium area. The library was removed and a concrete-walled x-ray room was added within the space, date unknown. The space is currently used for building maintenance. The committee rooms still exist, but are used for building storage. There are several other building utility and storage rooms that have been added over the years.

1950 Addition and Renovation - Exterior

The 1950 addition and renovation included the addition of floors three through sixteen on the northeast half of the site and a complete renovation of the first and second floor facades. Designed by Seattle architect William Henry Fey and owned by the United Medical and Dental Building Corporation/Metropolitan Building Company, it was influenced by

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Narrative Description: (Continued)

the Modern Movement in architecture. Though the floor plans are an "L" shaped configuration similar to the 1925 building, the façade fundamentally departs from the original gothic-influenced design. It is flat and unadorned, with the exception of projecting hinges at the upper steel windows. The windows punctuate the terra-cotta skin in a similar pattern and proportion to the 1925 edifice, with two windows per each structural bay. Floors three through sixteen are identical with the exception of the pipe attic at the fifteenth floor, which has no windows. The entire volume is capped by a simple coping. The cladding is ceramic veneer terra cotta, set in a simple grid pattern with regular joints. It is similar in color to the 1925 terra cotta. The windows have paired casement sashes above a single full-width hopper sash.

The 1950 building structure is similar to the 1925 construction, with octagonal concrete columns, supporting concrete pan joists with concrete floor slabs. Unlike the 1925 building, the floor slabs of the addition are recessed, and have a built-up wood floor to match the 1925 floor level elevation. This "raised" floor contains horizontal pipe runs.

In conjunction with the upper floor addition, the exterior terra-cotta cladding at the entire first and second floors has been replaced with a flat terra-cotta tile⁷ of a blue-green color. The tile cladding covers the concrete columns at the first floor to maintain a bay rhythm, but the continuation of the bay rhythm at the second floor has been eliminated in favor of a "band" type treatment of the second floor windows. The terra cotta was painted in the 1990s and is no longer a blue-green color.

The second floor windows were replaced along with the terra cotta, and are of a similar configuration to the steel windows above. All of the windows are surrounded by the continuous projecting terra-cotta band, running horizontally above and below the windows and vertically at the endmost windows on each façade. The windows are adjoined as groups of four, occupying a full bay width. Ten bays of the steel window have since been replaced with aluminum sash windows, and appear to date from the 1990s.

The first storefronts were similarly replaced, but in reviewing the available drawings and photographs from the era, it is unclear whether a comprehensive strategy for the storefront renovation was developed. The storefront bays are currently a mix of clear aluminum, dark bronze aluminum and black aluminum, as well as some granite panels and painted terra cotta infill. The majority of the storefronts appear to date from the 1970s or later. However, one of the storefront bays directly west and two storefront bays to the east of the main entry are clear anodized aluminum and appear to date from the 1950s. Drawings from 1956 indicate that the storefront bays to the west of the entry were modified after the 1950 renovation. The current configuration of the storefronts is similar to the drawings, but not identical. The fabric awnings were added in the 1990s.

As previously mentioned, the lobby was significantly altered in the 1950 renovation. The main lobby entrance is currently a highly polished, clear aluminum storefront system with full glass doors and granite surrounds, circa 1980s. The lobby entry marquee is a simple black metal, box-type canopy. The interior of the lobby has been modified at least twice since the 1950 renovation, but still contains some elements, such as marble wainscot paneling, elevator cab surrounds and the 1925 letter box. The 1950 acoustic tile ceiling sits partially intact above the currently drywall ceiling, but has been heavily damaged by installation of mechanical equipment and duct runs.

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Narrative Description: (Continued)

The upper floor corridors in the 1950 wing are generally finished more simply than the 1925 wing, with carpet covering the original vinyl tile floor, plaster over plaster block or terra-cotta tile at the walls, and acoustic tile attached to a plaster ceiling.⁸ There is no wood casing, wood cable tray, terrazzo floor or marble base. Most floors have the original "L"-shaped corridor configuration, though at floors three and seven the corridor has been moved or removed to accommodate tenants. As previously mentioned, the ninth floor corridor was removed.

Unlike the 1925 tenant improvements, the 1950 tenant space was treated as a speculative office build out, without specific tenants assigned to the various floors.⁹ Simple, flush birch entry doors with steel jambs and transom louvers were placed at regular intervals in anticipation of potential tenant entries. Some original doors still exist, but many entries have been added and modified over the years, and like the 1925 wing, some entries have been recessed to create vestibules.

The Medical Dental Building has proud history of continuous operation as an office building serving the Seattle medical and dental communities. Its architecture has equal merit, offering a rare opportunity to see two distinct attitudes toward modern medicine manifested in the building's architectural language.

¹*The Medical and Dental Building Bulletin: Special Souvenir Announcement Number, 3.*

²*Plans of Office Building for the Bradner Building Co, Seattle, Washington, 1924 Drawings 1-19.*

³*Ibid. Souvenir Bulletin, 17.*

⁴Historic photographs, Medical Dental Building, northeast wing under construction, December 7, 1949. Museum of History and Industry, Seattle Post-Intelligencer Collection, P120891; and Medical Dental Building, northeast wing under construction, March 31, 1950. Museum of History and Industry, Seattle Post-Intelligencer Collection, P1120893 (included in nomination).

⁵*Specification for Medical and Dental Building for Bradner Building Co, 1924, 35.*

⁶*Plans for Addition to Medical & Dental Building, 509 Olive Way, United Medical & Dental Corp, Seattle, Washington, Metropolitan Bldg Co., 1949, Sheet No. 26.*

⁷*Ibid.* Historic photographs, Medical Dental Building, northeast wing under construction, December 7, 1949 and Medical Dental Building, northeast wing under construction, March 31, 1950.

⁸*Plans for Hospital, Medical & Dental Building, 509 Olive Way, United Medical & Dental Corp, Seattle, Washington, Metropolitan Bldg Co., 1949, Sheet No. 10.*

⁹*Plans for Addition to Medical & Dental Building, 509 Olive Way, United Medical & Dental Corp, Seattle, Washington, Metropolitan Bldg Co., 1949, Sheet No. 4.*

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MEDICAL DENTAL BUILDING
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Narrative Statement of Significance:

The Medical Dental Building is historically significant for the National Register of Historic Places under Criterion "A" for its significant contributions to the development and growth of the medical profession in the City of Seattle. The property is also significant under Criterion "C" for its architecture—notably its intact terra cotta in both 1920s and 1950s styles. The building opened in 1925 as Seattle's premier medical center; it was expanded in 1950 with a new wing that doubled its office space. Today, it is the only historic medical dental building in downtown Seattle.

Philosophy and Planning

Three years before the building opened, doctors and dentists held general meetings, and conceived the idea of establishing a "real medical center in Seattle," where only highly qualified graduates of accredited medical and dental schools would be admitted to practice. The project's early history is described in a promotional booklet, "The Medical Dental Building Bulletin—Special Souvenir." Participants at the meetings voiced grievances about their current working conditions, including a lack of adequate facilities and landlords who made "repeated and unjustified advances in rental prices."¹ The local medical establishment was in tune with the American Medical Association, which during the 1920s and 30s (and later) campaigned bitterly against socialized medicine and "quacks," such as drugless healers, chiropractors, and acupuncturists. During the teens, Seattle's population had exploded from 240,000 to more than 300,000. The Cobb and Stimson medical and dental buildings, both of which dated from the early teens, served the downtown area to the south, but in the rapidly growing city, many doctors and dentists had to rent space in other office buildings.

Results of the general meetings included the name, Medical Dental Building, and a list of priorities, most notably:

- "The location must be ideal for present needs and permit of at least 100 percent expansion;
- the building in regard to tenants must be under professional control for the reason that heretofore many so-called medical buildings operated on a commercial basis have been a Mecca for the medical parasites and fakers, who in many instances found little difficulty in getting into them, and once there preyed upon the public at their will under the very noses of medical men of higher ideals;
- a large assembly room must be provided within the building for the use of the professional men when holding their county meetings, conventions, lecture and study courses, banquets, and other gatherings necessary to their advancement and progress;
- the structure itself must be most modern in every respect and must provide adequate and quite elevator service, a special forced ventilating system to carry off all odors of drugs or dressings, and replenish the offices with pure fresh air;
- every detail of the building must be planned along the lines of our most modern ideas of cleanliness and sanitation and safety from fire menace and all these things at a cheaper price than heretofore!"

A "professional committee" was appointed to advance the proposed project.²

In addition to their professional associations, many of the doctors and dentists were active in the city's social, religious, political and civic life: they were members of exclusive organizations, such as the all-male Rainier and City Clubs (the few women doctors joined the prestigious Women's University Club); some were avid outdoor enthusiasts; some were patrons of the arts; and some were decorated veterans who had served in the medical corps during World War I.³ In short, they were well connected with Seattle's business leaders and moneyed establishment. It was the "roaring twenties" and investors were optimistic about taking a good risk. The Bradner Building Company was

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Narrative Statement of Significance: (Continued)

the original owner of the Medical Dental Building; its president, Leo Bradner, worked closely with the professional committee in all phases of planning and development, including fund raising.⁴

Choicest Location in the City

The selected site was the remainder of the block northeast of Frederick & Nelson Department Store (John Graham Sr., 1918). Located north of the commercial district, the store would become the flagship of downtown's new north retail core. Since the beginning of the century, the business and commercial district had been gravitating northward from its original home in Pioneer Square. In the mid 1920s, the Medical Dental Building would rise as the defining structure on downtown's northeast cusp.

The *Souvenir Bulletin* proclaimed, "The location is the choicest in the city, as there are more streets intersecting around this block than at any other downtown point." This was significant at a time when the automobile was ascending, as the preferred mode of transportation. The lot has frontage on Sixth Avenue, Olive Way, and Fifth Avenue, which is widened near the intersection to accommodate merging traffic to and from Westlake Avenue. The configuration predetermined the Medical Dental Building's widely visible chamfered corner. The building's unobstructed prominence was further assured by the open pedestrian triangle across Olive Way, which is flanked by Fifth and Westlake Avenues and Stewart Street. Streetcar passengers, bound for downtown and for outlying residential areas, gathered on the pedestrian island, where the statue of Washington State's second governor, John H. McGraw (sculpted by Richard Brocks, 1909), faces the Medical Dental Building. The statue has its back to the flatiron Times Square Building (Bebb and Gould, 1916), which had reigned as the predominant structure in the neighborhood of modest hotels, garages, and other small businesses for almost a decade.⁵

Collaborative Design and Construction

The Bradner Building Company and the professional committee chose John Alfred Creutzer (1874 – 1929) as their architect with A. H. Albertson (1872 – 1964) as consulting architect. Creutzer was born in Sweden and immigrated to Minneapolis as a child. Where he received his architectural training is unknown, but he practiced in Minneapolis and in Spokane, before moving to Seattle in 1906 to design the Swedish Tabernacle. He received his architectural license (# 224) on April 7, 1920. The Medical Dental Building represents his most significant commercial design commission and was one of his last projects before his death in 1929. From 1913 to 1929, he designed several smaller scale business blocks, retail buildings, apartment houses, churches, and private residences, most of which were in Seattle. Extant examples of his work include Carolina Court (apartments) on Eastlake Avenue, the Vista Apartments near Cowen Park, and the El Rio Apartments in the Capitol Hill neighborhood. These structures, along with photographs and renderings of some of his other designs, show a predominance of Gothic Revival, Colonial Revival, and Beaux Arts styles.⁶

The *Souvenir Bulletin* praises Creutzer's skill "in designing beautiful and financially successful apartment houses and office buildings." But there may have been another undisclosed reason for selecting him as the Medical Dental Building's architect. In 1921, Creutzer designed the unbuilt Seattle Sanipractorium—a massive six-story structure with treatment rooms, practitioners' offices and an auditorium for 400 persons that would have stood in the upscale Madison Park neighborhood, overlooking Lake Washington. The physicians disdained sanipractors and other drugless healers, and would have avoided any association with them. But they may have seen many desirable

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Narrative Statement of Significance: (Continued)

features in the Sanipractorium design, which received the attention of the local press.⁷ Creutzer's impressive body of work does not include other known designs of medical buildings.

Records list fellow Seattle architect, A. H. Albertson as Creutzer's consulting architect for the Medical Dental Building, but details about their collaboration are unknown. His name does appear on the plans for the building. Albertson had come to Seattle in 1907 as the representative of Howells and Stokes of New York to prepare a plan for development of the University of Washington's downtown Metropolitan Tract, where his designs included medical suites in the Cobb and Stimson Buildings. As one of the city's leading architects, his work included Cornish School of Fine Arts on Capitol Hill.⁸

The Medical Dental Building's general construction contract was awarded to the A. W. Quist Company. Quist and his associate, A. S. Downey, had earned a reputation for dependability, attention to complex details, and for completing projects on time. Their work included the Seattle Times Building, several other significant structures in the downtown area, and the Medical Dental Building in Tacoma.⁹

The "professional committee" screened and approved tenants for ten-year leases of spaces on the sixteen upper floors. The necessary qualifications, described in a lengthy essay in the *Souvenir Bulletin*, attracted many of Seattle's finest physicians and dentists, who wanted to avail themselves of the collegiality, as well as the building's amenities. The committee worked closely with the building's manager, Hartley Realty Company. First- and second-floor storefronts were leased to promising businesses with high ethical standards, such as Buster Brown Shoes (for children), Kelley-Ross Pharmacy, Marine National Bank, and Western Optical (which moved to the building in 1929). Interior commercial spaces included Burhardt Dental Supply and a smoke shop, adjacent to the lobby.¹⁰

The *Seattle Daily Times* gave front-page coverage to the project in its Sunday, May 30, 1924 edition with a headline, "Eighteen-story Building Work Starts Monday." According to the article, physicians and dentists had already signed ten-year leases for 75% of the space above the second floor, ensuring the building's future economic vitality. As the final phase of financing for the \$2,500,000 construction project, the article reported the purchase of a \$1,475,000 bond issue by S. W. Strauss & Company, which was selling first mortgage 6½% serial coupon bonds to investors. The article proclaimed that the "Gothic design" and the site would make the building "one of the dominating features of the downtown district and one of the handsomest business structures of the Pacific Coast."¹¹ The Times Building, which stood catty-corner from the site, had floodlights installed on its roof to illuminate the new structure.¹²

The Medical Dental Building gained widespread notice from architects and builders for its strict use of concrete and for the rapid pace of construction. On January 24, 1925, the Annual Edition of the *Seattle Daily Journal of Commerce* reported:

Having climbed toward the sky at the rate of two stories a week while under construction and being one of the four tallest strictly concrete structures in America, the new Medical and Dental Building . . . marks a record for rapid construction. . . . [T]he new building features a departure in skyscraper construction destined to have material effect on future building.

As the building rose, its stately Gothic Revival architecture reflected the philosophy and mission of its founders. The architects designed the interior with tenants in mind, creating a holistic environment with laboratories,

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conference rooms, spaces for medical and dental schools, and the nine-bed hospital with two surgery suites that Nan Rowlands, a Scottish emigrant, founded on the sixth floor. Leased spaces were individualized with partitions and entries that met tenant specifications. During the latter stages of construction, eager doctors and dentists used the outside service elevator to transport dental chairs, examination tables, desks, and other equipment up to their offices, and Rowlands utilized it to ready her hospital for staff and patients. The northeast side of the basement was a parking garage, used by doctors on call at hospitals and by infirm patients who needed direct access. The basement's southwest side housed a medical library, meeting rooms, a kitchen, and a commodious auditorium. By late summer 1925, the building was completed and the tenants were open for business.¹³

Professional Medical Center

In the 1920s, the University of Washington had a premedical program, but no schools of medicine or dentistry; the nearest dental college was in Portland, Oregon. Seattle hospitals did not have their own medical centers, and most physicians on hospital staffs had their offices elsewhere.¹⁴ Consequently upon its completion, the Medical Dental Building became the professional center that its founders envisioned. Some of the original tenants were: Dr. Nils Johansen, an eminent surgeon and the founder of Seattle's Swedish Hospital (1910); Dr. John McVay, a highly decorated Navy veteran, who had served as a combat medical officer with the rank of rear admiral during World War I; Dr. Frederick Slyfield, a specialist in chest diseases and founder of a sanatorium in southwest Seattle; Dr. Mabel Seagrave, an obstetrician and gynecologist, who served on the staffs of four local hospitals;¹⁵ Dr. Ralph Edgerton Plummer, a dentist and founder of the Academy of Gold Foil Operators; and Dr. Alvin Linne, who served as president of the Seattle-King County Dental Society from 1924-25.¹⁶

Like Linne, many of the Medical Dental Building's tenants played leadership roles in their respective professional organizations. The King County Medical Society held social gatherings and weekly meetings in the building's auditorium, requiring members to attend the meetings at least twice per month. Programs featured speakers on new medical developments and on public health, often fueling socio-political action on issues, such as control of infectious diseases and care of the indigent. The Seattle-King County Dental Society had a similar agenda with programs in the auditorium. Other facilities in the building, such as the seventeenth-floor conference room, were utilized for specialized study groups—a forerunner of today's post-graduate education programs.¹⁷ Dr. Plummer, who may have been the building's first tenant, secured space on the eighteenth floor, where he and his fellow dentists established a state-of-the-art classroom with four dental chairs.¹⁸ Over the years, the equipment has been updated. Today, the room remains significantly intact.

Expansion Delayed by Stock Market Crash

In August 1927, Oscar Drumheller and C.D. Bowles purchased the Medical Dental Building for \$2,750,000.¹⁹ The upper floors were fully occupied with a growing roster of applicants for any spaces that became available. Architects drew plans for the originally-intended expansion, which would mirror the building's existing southwest side and almost double the office space on the upper floors.²⁰ Money was available and investors had deep pockets, as evidenced by the wave of ambitious new construction projects in the downtown area. The Bergonian Hotel (now the Mayflower, Stuart and Wheatley, 1926) contributed stature to the block southwest of the Medical Dental Building on Olive Way; the opulent Orpheum Theater (Marcus Pritica, 1927; demolished in 1968 and replaced by the first of the

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Westin Hotel's twin cylindrical towers) stood across the pedestrian triangle at Fifth and Stewart, where it featured vaudeville and movies.²¹

Then in October 1929, the New York stock market collapsed, sending economic shock waves around the world. In downtown Seattle, private development came to a virtual standstill that would last for the next two decades. At the Medical Dental Building, plans for expansion were set aside. Commercial and medical tenants struggled to stay in business, and some of them failed. Doctors and dentists continued to hold annual elections of the professional committee, which was charged with screening new applicants and upholding the building's high standards, even when offices stood vacant. In 1933, the hospital was moved from the sixth to the third floor, where its capacity more than tripled to 33 beds. The hospital had its own lab facilities, a fully-stocked pharmacy, and a kitchen.²² The buildings' professional staff collaborated to provide personalized, quality patient care that was often less expensive than the alternative of a larger hospital.

The National Bank of Commerce became the building's major shareholder in 1937.²³ (Andrew Price had owned Marine National Bank, when it opened in the Medical Dental Building. He and his father, John Price, merged banks that they founded into Marine Bankcorporation in 1928, then into the locally-owned NB of C in the early 1930s.)²⁴

The Great Depression ended abruptly on December 7, 1941, when Japan bombed Pearl Harbor. The United States was at war with jobs for every able hand in the military and on the home front. Wartime industries and the military spawned a population boom in Seattle. Quickly, the Medical Dental Building was leased to capacity with a waiting list for available space.

During the war, the Washington State Medical and Dental Societies promoted the idea of opening a medical and dental school at the University of Washington. In 1945, the state legislature voted to establish a medical school and a school of dentistry and appropriated funds for buildings and salaries. Construction of the Health Sciences Building began in 1947 on the south side of the campus. However salary appropriation was not sufficient to fund all of the necessary programs, so local doctors and dentists pitched in as volunteers to help. Dr. Frederick Lemere, who had opened his psychiatry practice in the Medical Dental Building in 1937, volunteered to serve as temporary head of the Medical School's Department of Psychiatry.²⁵ As the university's programs grew, several of the Medical Dental Building's practitioners served in faculty positions and on boards.

On May 31, 1946, the Metropolitan Building Company purchased a controlling interest in the Exchange and Medical Dental Buildings from United National Corporation. At between 5 and 6 million dollars, it was one of the largest real estate transactions in Seattle history. Metropolitan would own more than 60% of the Exchange Building capital stock and 100% of United Medical Dental Building Corporation stock. Metropolitan established United Medical Dental Building Corporation as its subsidiary, and United National Corporation remained a major shareholder. (During the 1930s and 1940s, records indicate several changes in ownership of the Medical Dental Building, but the respective corporations were most likely major shareholders. United National Corporation's labels begin to appear on architects' drawings in 1928, suggesting that it was the actual owner.) The 1946 transaction marked Metropolitan's first outright ownership of property. Its other buildings, which were on a downtown tract owned by the University of Washington, were built and paid for by the firm, but were operated under a ground lease that was set to expire in 1954, when the buildings would revert to the university. Norton Clapp, a member of the Weyerhaeuser timber family, had founded Metropolitan to manage the downtown university tract.²⁶

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New Office Wing and Storefront Redesign

At the time of purchase, Metropolitan announced its intent to construct a \$1,000,000 expansion of the Medical Dental Building,²⁷ and assigned the project to one of its architects, William Henry Fey (1886-1977). Fey's designs included the Fifth and Union Street Building and the plaque commemorating "Victory Square" (a rallying point on University Street in front of the Olympic Hotel for World War II war bond drives and patriotic celebrations).²⁸ Fey launched the Medical Dental Building project by designing three new elevators, which were installed in the elevator core. He drafted plans for the new wing to be built atop the two stories extending northeast of the tower, but there were delays. On June 24, 1949, in a front-page feature, *The Seattle Times*, announced that construction was to begin in about a month. Metropolitan's president, Andrew Steers, said, "When we acquired this property in 1946, it was our intention to add the wing to meet the rapidly increasing need for medical and dental office space. Postwar shortages of labor and materials forced postponement of the work until now." Inflation during the three years resulted in a revised budget of \$1,750,000. Steers said that the wing would "double the office capacity of the building, currently occupied by 130 physicians and 105 dentists."²⁹ Construction was completed in a year. The new wing added 100,000 square feet, increasing the total office area to 260,000 square feet.

Unlike the original architects, Fey designed an open floor plate; he did not individualize office spaces while construction was underway. Like the original architects, Fey chose an architectural style that was popular in his day. He redesigned the lobby and the first and second floor storefronts in the 1925 building, but did not alter the exterior of the original upper floors. As a result, the building provides a unique combination of 1920s and 1950s design elements. The northeast wing mirrors the older southwest wing in mass, configuration, and color, but the modern architecture with its unadorned surfaces differs decisively from the building's original Gothic Revival style. The juxtaposition of 1920s and 1950s terra cotta is especially significant.

Terra Cotta: Traditional and Modern

The 1920's terra cotta is representative of a type of artistic, economical, fireproof cladding that could replicate carved stone and metal, and that was used extensively in Seattle from the turn of the century to the 1930s. Following construction of the Smith Tower in 1914, new technology enabled production of a lightweight, weatherproof, terra-cotta skin in pieces that had holes on the back. A combination of metal anchors, mortar, and masonry backfill made it easy to attach the pieces to a structural frame. This method was widely employed in downtown buildings, including the Medical Dental Building.³⁰ Its architect, John A. Creutzer, produced detailed specifications, and contracted with the Washington Brick, Lime & Sewer Pipe Company, located in Clayton, WA near Spokane, to manufacture the cream-colored terra cotta.³¹

Clayton was named for abundant clay in the surrounding hills that provided raw material for the factory. Founded in 1892, the Washington Brick, Lime & Sewer Pipe Company had grown into one of the largest producers of terra cotta in the Northwest. Its "main works were housed in a four-story brick building 80 x 160 feet with auxiliary fitting sheds 400 x 30 feet along the sides. Nine down-draft muffled kilns fired the terra cotta and the monthly production was about 450 tons."³² The labor-intensive process began with molds, some of which were boilerplate, and others that had to be custom made. The molds could be used repeatedly. Wet clay was modeled onto the molds and dried, prior to application of a glaze coat with the required color and textural details. The glaze coat had to dry before the tile was fired at 2000 degrees for three to four days; the kiln had to cool for another two to three days,

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after which the pieces were checked for alignment, cracking and other details. Then they were trimmed and delivered to the job site.³³

In the 1930s, the demand for traditional terra cotta declined rapidly, because of rising production costs and the Great Depression. Newly developed ceramic veneer terra cotta took its place. The material could be mass produced. Unlike traditional terra cotta, it is not hollow cast, but is thin and flat with ribbing on the back, much like bathroom tiles. As in the northeast wing of the Medical Dental Building, ceramic veneer is commonly attached to a grid of metal ties that are anchored to the structure.³⁴ The flat, unadorned veneer was not only popular and available; it had a "fifties look" that suited William Fey's design. Fey contracted with Gladding-McBean Company, which had manufactured terra cotta for a variety of Seattle buildings since the turn of the century. Founded in Lincoln, California, Gladding-McBean had grown into one of the nation's largest terra cotta producers. Its Van Asselt and Auburn plants in south King County served regional markets,³⁵ and produced the cladding for the Medical Dental Building's northeast wing and for its storefronts. Fey's redesign at the first and second floors called for removal and replacement of the original terra cotta. Today, the building's 1920s and 1950s terra cotta are in good condition and remain intact. The juxtaposition provides a unique historical comparison of changes in cladding technology and architectural styles, as well as an example of two well known terra cotta manufacturing firms.

Tenancy and Transitions after 1950

The northeast wing opened during the summer of 1950, and was fully occupied by tenants who had satisfied the professional committee's requirements. They included some of the first graduates from the University of Washington's medical and dental schools. One of them was Dr. John Sproule, a dentist, who worked closely with Dr. Ken Morrison, a practitioner in the Medical Dental Building and a founder of the dental school. Sproule joined Morrison as a member of the university faculty, where both of them were known for going to exceptional lengths to support aspiring students, including the school's first ethnic minorities.³⁶ At the Medical Dental Building, they recruited the first Japanese-American tenants, Watson Asaba and Sam Goto, both of whom were experienced certified dental technicians, specializing in crowns and bridgework. In the 1960s, Dr. Homer Harris, a Seattle-born African American, broke racial barriers, when the professional committee accepted his application to open a dermatology practice.³⁷

In the depths of the Great Depression, Walter Clark had leased one of the ground-floor commercial spaces for a restaurant, the first of what would become a prestigious, family-owned, local chain. In the 1950s, Clark's Red Carpet Restaurant opened on the southwest side of the building. It quickly earned a reputation as one of the best dining places in the city, and was a popular lunch venue for doctors and dentists, who had their own dining room. In addition, the Clarks developed and managed the Medical Dental Building's employee cafeteria, which was located above the restaurant on the second floor.³⁸

By the 1970s, local hospitals, notably Swedish, had their own rapidly expanding medical centers that featured advanced technology, modern hospital facilities, and fully-equipped suites for physicians. Several doctors closed their downtown offices and moved their practices up to what was popularly known as "Pill Hill." As a result, the Medical Dental Building professional committee had to relax its strict requirements. The professional staff altered its stance against socialized medicine and accepted Group Health Cooperative as a major tenant that leased an entire floor.³⁹ Other previously excluded practitioners were also admitted, including acupuncturists, naturopaths, and osteopaths.

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In February 1977, Harsch Investment Properties, a Portland-based company, purchased the building from Northwest Building Corporation for \$3.5 million with plans to remodel and upgrade it.⁴⁰ (The older Metropolitan Building Company had dissolved its subsidiary, United Medical and Dental Building Corporation, and reorganized with two divisions: Northwest Building Corporation, which owned the property; and Metropolitan Building Corporation, which managed it.⁴¹) Harsch began publishing the *Medical Dental Building Gazette* as an internal newsletter. The opening article states, "It is our intention to make the Medical Dental Building the prestige address in Seattle for the medical profession. Surveys show that patients like to come downtown to combine their office visit with shopping or luncheons. . . . We want them particularly to enjoy coming to you in this building, which is centrally located to everything." The newsletter highlights technical schools for dental assistants and technicians on the second floor, the hospital on the third floor, and the day nursery on the tenth floor that cared for pre-schoolers during their mothers' doctor or dental appointments.⁴²

In 1988, Harsch acquired the third floor hospital from a group of physicians, paid off \$300,000 in delinquent bills to rescue it from bankruptcy, and undertook a \$500,000 renovation. Promoters tried to establish the facility as a convenient and economical alternative to larger hospitals, where doctors could perform outpatient surgery, and where day patients would have quality, personalized care.⁴³ Ambulatory Resource Center leased and managed the facility, which was successful until 1999, when Swedish Hospital became involved and moved the program to its medical center. The hospital space in the Medical Dental Building had to remain vacant until the expiration of ARC's lease in 2005. In the interim, Group Health Cooperative moved its downtown facilities out of the building. Another significant loss was the 2004 departure of Kelley-Ross Pharmacy, an original tenant and long-term occupant of the storefront next to the entrance.⁴⁴

While struggling to revitalize the medical and dental center, Harsch entertained offers from prospective buyers. One of them was Jeff Rhodes, who purchased an option in 1996 to buy the building and convert the upper floors to offices for Nordstrom. Rhodes allowed the option to expire. He went on to build Pacific Place across Sixth Avenue from the Medical Dental Building, and to renovate the old Frederick & Nelson Building as the Nordstrom flagship store.⁴⁵

Revitalization as Historic Downtown Medical Center

In July 2005, Goodman Real Estate purchased the building from Harsch Investment Properties for \$38 million. The building was approximately 70% occupied with a tenant base that remained predominantly medical and dental practices. In a spirit that recalls the founders, a Goodman representative said, "It's still an exceptionally well-located building."⁴⁶ On its southwest side, the historic Frederick & Nelson building is now Nordstrom's flagship; Pacific Place across Sixth Avenue and Westlake Center across Fifth Avenue are at the heart of downtown's retail core. Goodman plans to renovate and preserve the Medical Dental Building. Along with existing tenants and their services, new tenants will be recruited to expand and update the building's historic mission into a contemporary context of a "health and wellness" neighborhood. Today, the Medical Dental Building stands alone as Seattle's only historic downtown medical center.

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- ¹ *The Medical and Dental Building Bulletin: Special Souvenir Announcement Number, 3.*
- ² *The Medical and Dental Building Bulletin: Special Souvenir Announcement Number, 3-5.*
- ³ Clarence Bagley, *History of King County*, vol. 3, 1928, biographical sketches on several different pages.
- ⁴ *ibid. The Medical and Dental Building Bulletin, 17.*
- ⁵ Walt Crowley, *National Trust Guide—Seattle*, 1998, 103.
- ⁶ Creutzer file, University of Washington Libraries: Manuscripts, Special Collections, and University Archives
- ⁷ *Seattle Daily Journal of Commerce*, Jan. 11, 1921.
- ⁸ *ibid. Ochsner, 164; see also Souvenir Bulletin, 17.*
- ⁹ *ibid. Souvenir Bulletin, 17.*
- ¹⁰ Polk Directories, City of Seattle, 1925-29
- ¹¹ "Eighteen-story Building Work Starts Monday," *Seattle Daily Times*, May 30, 1924, A-1 and 8, illus. with architect's rendering. A related advertisement by S. W. Strauss & Co. announces sale of first mortgage 6 ½% serial coupon bonds in denominations of \$1,000, \$500 and \$100. S. W. Strauss's local address was at 255 Empire Building; its other locations were in San Francisco, Oakland, and Spokane.
- ¹² "Medical-Dental Home is 'High Spot' in Seattle," *Seattle Daily Times*, Aug 7, 1927.
- ¹³ "Medical Dental Hospital 60 Years Old," *Medical Dental Building Gazette*, Aug-Sept, 1985; "Dr. Robert C. McCarter, One of the Building's Original Tenants," *Medical Dental Building Gazette*, 1984; "Drs Robert C. (father) and Robert G. McCarter, Practicing Dentistry in Suite 1025," *Medical Dental Building Gazette*, Mar. 1981.
- ¹⁴ *ibid. Rockafellar.*
- ¹⁵ *ibid. Bagley.*
- ¹⁶ Harold Sondheim, DMD., "Dr. Ralph Edgerton Plummer, 1891-1985," *Medical Dental Building Gazette*, 1988.
- ¹⁷ Fredrick Lemere, M.D., Interview by Mildred Andrews, June 16, 2005. Lemere practiced psychiatry in the Medical Dental Building from 1937 to 2005.
- ¹⁸ *ibid. Sondheim.*
- ¹⁹ "Medical-Dental Building Sold for \$2,750,000," *Seattle Daily Times*, Aug. 7, 1927.

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²⁰ Unexecuted plans for the proposed addition are on file in the building manager's office.

²¹ *ibid.* Crowley

²² *ibid.* "Medical Dental Hospital 60 Years Old"

²³ King County Assessor's Records

²⁴ *ibid.* Bagley

²⁵ *ibid.* Rockafellar

²⁶ "5 Million Sale of Downtown Realty Made," *Seattle Post-Intelligencer*, June 1, 1946; "Metropolitan Firm Takes over 2 Big Structures," *Seattle Times*, June 2, 1946, B-2; Bob Burton (building manager, 1974-- , Interview by Mildred Andrews, Sept. 4, 2005; Steve Radmacher (building bookkeeper, 1975-78), Interview by Mildred Andrews, Sept. 1, 2005.

²⁷ *ibid.* "Metropolitan Firm Takes Over 2 Big Structures."

²⁸ William Henry Fey [obituary], *Seattle Times*, Dec. 19, 1977.

²⁹ "16-Story Medical-Dental Bldg. Annex to Go Up Soon: Addition to Double Space," *Seattle Times*, June 14, 1949, A-1, photo on A-5.

³⁰ Lydia Aldredge, ed. *Impressions of Imagination: Terra-Cotta Seattle*, 1986.

³¹ *ibid.* *Souvenir Bulletin* 17

³² *ibid.* Lydia Aldredge 3

³³ de Teel Patterson Tiller. *The Preservation of Historic Glazed Architectural Terra-Cotta*.

³⁴ *ibid.*

³⁵ *ibid.* Lydia Aldredge.

³⁶ "Dr. John Sproule" [Obituary], *Medical Dental Building Gazette*, Oct. 1981.

³⁷ Sam Goto, Goto Dental Laboratory, Inc., Medical Dental Building. Interview by Mildred Andrews, Aug. 11, 2005.

³⁸ P. E. Tibbetts, *Mr. Restaurant: a Biography of Restaurateur Walter F. Clark*, c. 1990.

³⁹ *ibid.* Fredrick Lemere

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⁴⁰ "Medical Building Sold," *Seattle Times*, Feb. 3, 1977, F-3

⁴¹ *ibid*, Bob Burton.

⁴² *Medical Dental Building Gazette*, vol. 1, no.1, April 1977

⁴³ "Downtown Building Back from Bankruptcy," *Puget Sound Business Journal*, Feb. 20, 1989, 23-4 and 32.

⁴⁴ Pat Riek, Asst. Property Manager, Harsch Investment Properties. Interview by Mildred Andrews, August 5, 2005.

⁴⁵ *Seattle Post-Intelligencer*, July 20, 1996

⁴⁶ "New Owner to Restore Historic 1925 Medical Dental Building," *The Seattle Times*, Aug. 3, 2005.

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Section number 10 Page 1 of 1

Verbal Boundary Description (Describe the boundaries of the property on a continuation sheet.)

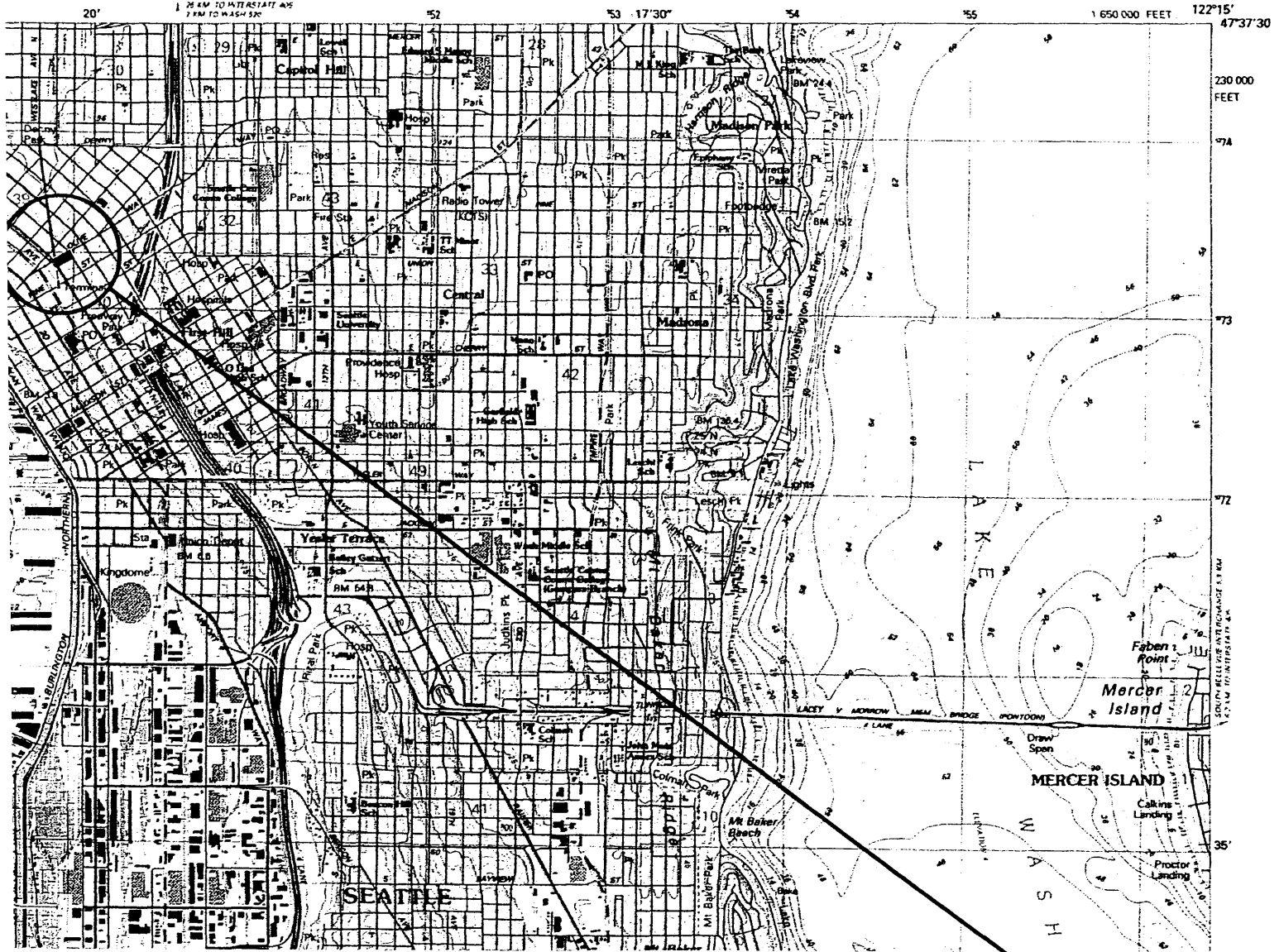
The nominated property includes all of Lot 6, except that portion condemned by the City of Seattle for Westlake Avenue; all of Lot 7; all of Lot 5, except the south 20 feet thereof; and all of Lot 8, except the south 20 feet thereof; together with that portion of the vacated alley lying between said portions of Lots 5 and 6 on the west, and Lot 7 and said portion of Lot 8 on the east; all in Block 2 Addition to the Town of Seattle as laid off by the heirs of Sarah A. Bell, deceased (commonly known as heirs of Sarah H. Bell's Addition to the City of Seattle), according to the plat thereof, recorded in volume 1 of Plats, page 103, in King County, Washington

Assessor's Parcel Number: 0659000085

Boundary Justification (Explain why the boundaries were selected on a continuation sheet.)

The nominated building occupies a downtown urban site platted into blocks and lots. The footprint of the building follows the lot plat boundaries, described above.

7.5X15 MINUTE SERIES (TOPOGRAPHIC-BATHYMETRIC)



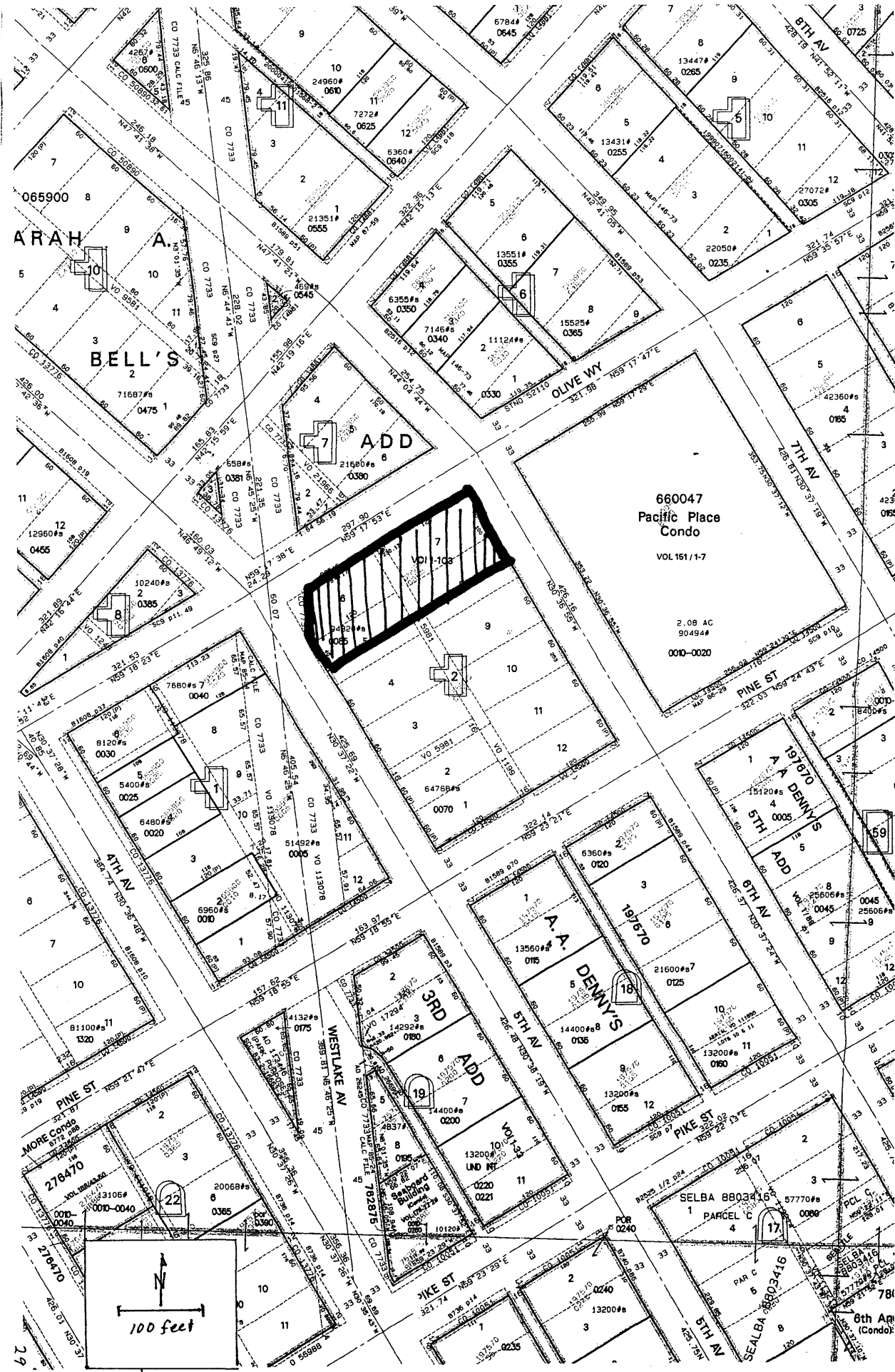
ADDRESS: 509 OLIVE WAY, SEATTLE, WASHINGTON 98101
 KING COUNTY TAX PARCEL ID: 065900008502
 LATITUDE AND LONGITUDE: APPROX. 47.61272 DEG N 122.33672 DEG W

LEGAL DESCRIPTION: ALL OF LOT 6, EXCEPT THAT PORTION CONDEMNED BY THE CITY OF SEATTLE FOR WESTLAKE AVENUE; ALL OF LOT 7; ALL OF LOT 5, EXCEPT THE SOUTH 20 FEET THEREOF; AND ALL OF LOT 8, EXCEPT THE SOUTH 20 FEET THEREOF; TOGETHER WITH THAT PORTION OF THE VACATED ALLEY LYING BETWEEN SAID PORTIONS OF LOTS 5 AND 6 ON THE WEST, AND LOT 7 AND SAID PORTION OF LOT 8 ON THE EAST; ALL IN BLOCK 2, ADDITION TO THE TOWN OF SEATTLE AS LAID OFF BY THE HEIRS OF SARAH A. BELL, DECEASED (COMMONLY KNOWN AS HEIRS OF SARAH H. BELL'S ADDITION TO THE CITY OF SEATTLE), ACCORDING TO THE PLAT THEREOF, RECORDED IN VOLUME 1 OF PLATS, PAGE 103, IN KING COUNTY, WASHINGTON.

Produced by the United States Geological Survey and the National Ocean Service
 Control by USGS, NOS/NOAA, USCE and King County Engineer Office
 Compiled by photogrammetric methods from aerial photographs in 1977. Field checked 1978. Map edited 1983
 Sources: Duwamish Head and Seattle South 1:24 000 scale maps dated 1949
 Bathymetry compiled by the National Ocean Service from tide-coordinated topographic surveys. This information is not intended for navigational purposes
 Mean low water (dotted) line and mean high water (heavy solid) line compiled by NOS from tide-coordinated aerial photography updated through 1977
 Projection and 1000-meter grid, zone 10, Universal Transverse Mercator
 100-foot grid ticks based on Washington coordinate system, north zone
 7 North American Datum
 Placement on the predicted North American Datum 1983 move the projection lines 93 meters north and 93 meters east
 Shaded relief indicates areas in which only landmark buildings are shown
 Private inholdings within the boundaries of the National or State surveys shown on this map

CONTOUR INTERVAL 5 METERS
 NATIONAL GEODETIC VERTICAL DATUM OF 1929
 BATHYMETRIC CONTOUR INTERVAL 2 METERS-DATUM IS MEAN LOWER LOW WATER, DATUM OF LAKE WASHINGTON IS LOW WATER WHICH IS 20 FEET ABOVE THE PLANE OF MEAN LOWER LOW WATER IN PUGET SOUND
 THE RELATIONSHIP BETWEEN THE TWO DATUMS IS VARIABLE
 CONTROL ELEVATIONS SHOWN TO THE NEAREST 0.1 METER
 OTHER ELEVATIONS SHOWN TO THE NEAREST METER
 BASE MAP COMPLIES WITH NATIONAL MAP ACCURACY STANDARDS. BATHYMETRIC SURVEY DATA COMPLIES WITH INTERNATIONAL HYDROGRAPHIC ORGANIZATION (IHO) SPECIAL PUBLICATION 44 ACCURACY STANDARDS AND/OR STANDARDS USED AS OF THE DATE OF THE SURVEYS

CONVERSION TABLE		DECLINATION DIAGRAM		ADJOINING MAPS		
Meters	Feet			1	2	3
1	3.2808	UTM grid convergence (GM) and 1983 magnetic declination (MD) at center of map Diagram is approximate		4		5
2	6.5617			6	7	8
3	9.8425			1 Suquamish* 2 Bellevue North 3 Bremerton East* 4 Bellevue South 5 Olalla* 6 Burien 7 Renton 8 *1:24 000		
4	13.1234					
5	16.4042					
6	19.6850					
7	22.9659					
8	26.2467					
9	29.5276					
10	32.8084					
To convert meters to feet multiply by 3.2808 To convert feet to meters multiply by 0.3048						



065900

ARAH A.

BELL'S

ADD

OLIVE WY

660047
Pacific Place
Condo

VOL 161/1-7

2.08 AC
90494#
000-0020

PINE ST

4TH AV

A.A. DENNY'S

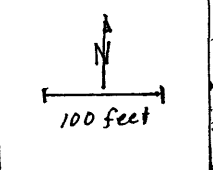
197670
A.A. DENNY'S

5TH ADD

3RD ADD

MORE Condo
278470

278470



WESTLAKE AV

5TH AV

PIKE ST

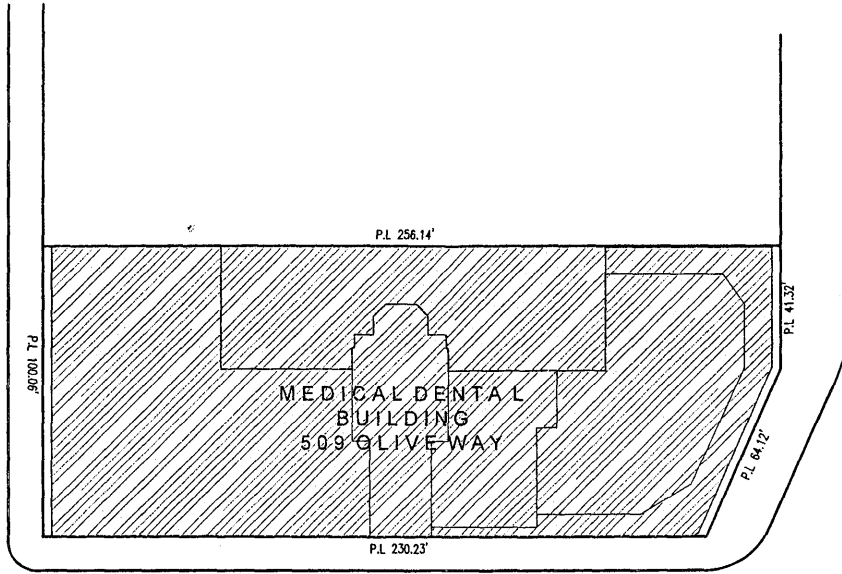
SELBA 8803416

PARCEL C

5TH AV

6th Av
(Condo)

6
6TH AVENUE



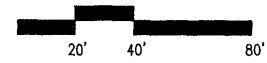
OLIVE WAY

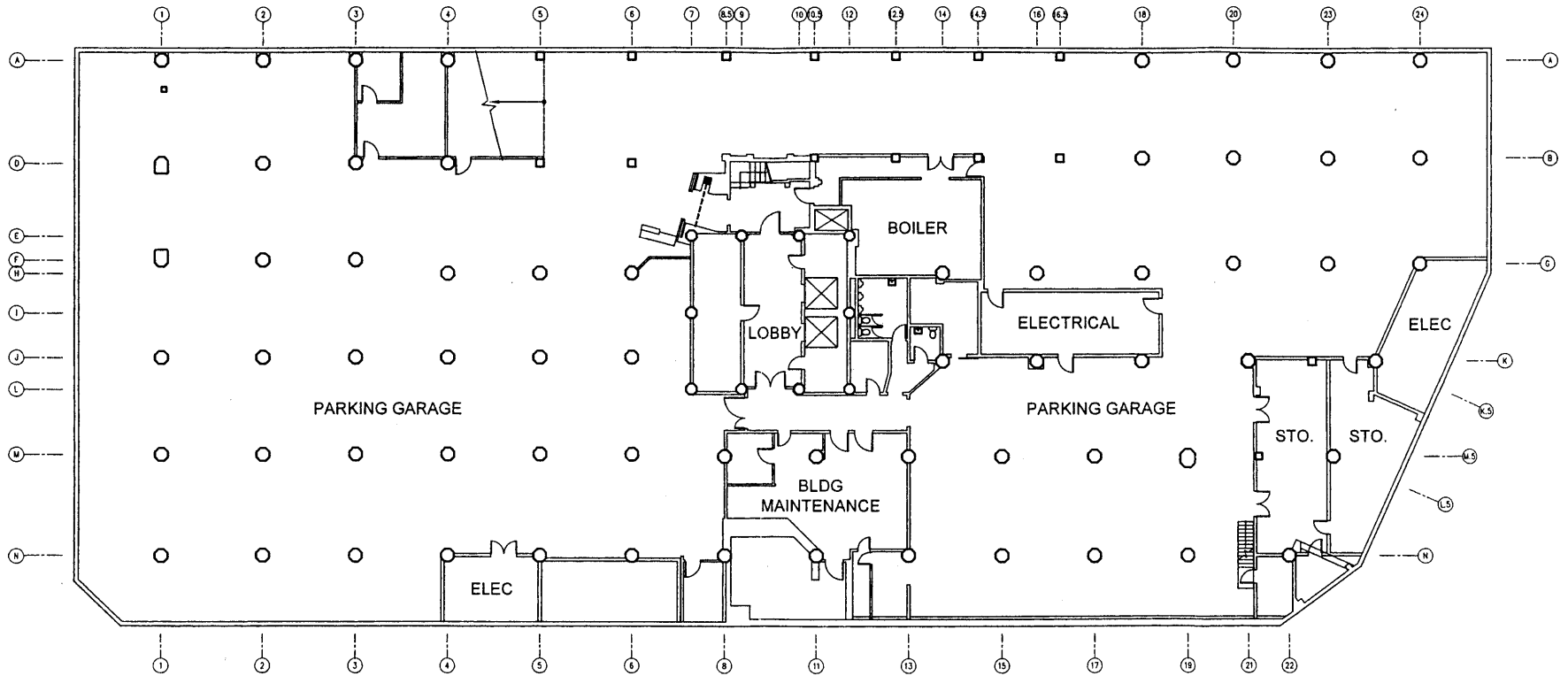
WESTLAKE AVENUE
5TH AVENUE

SITE PLAN

SCALE: 1"=40'

MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101

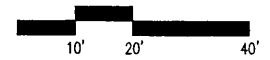


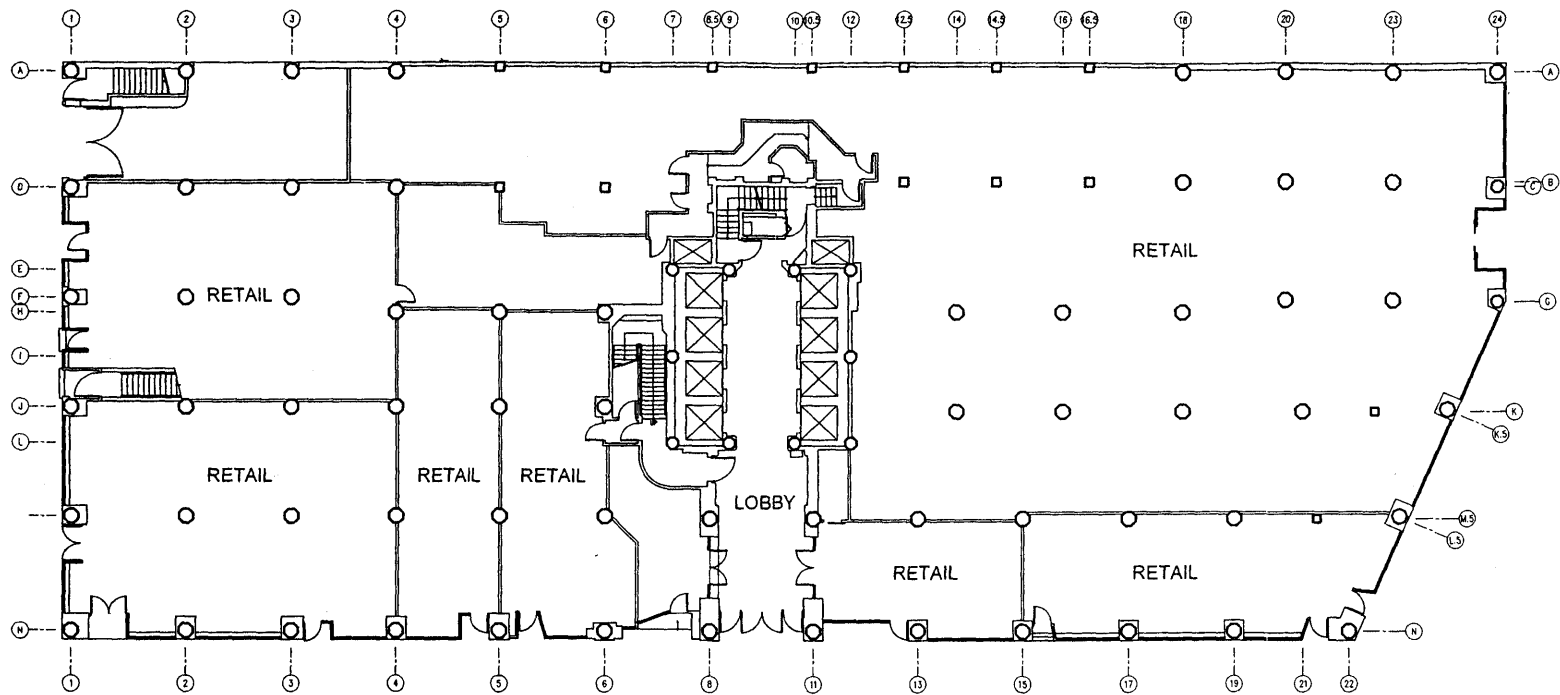


**BASEMENT FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'

MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101

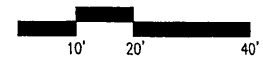


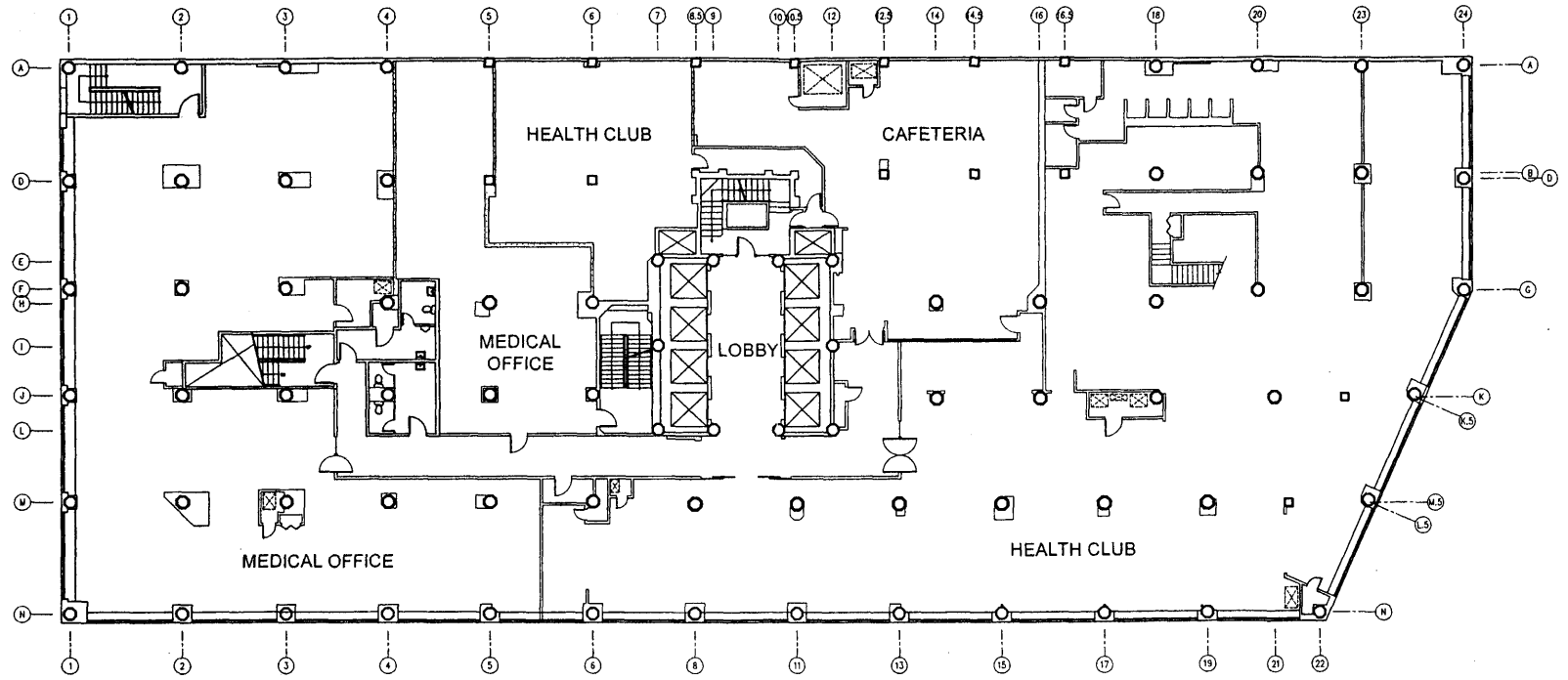


**FIRST FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'

MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101



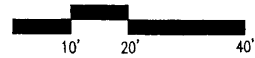


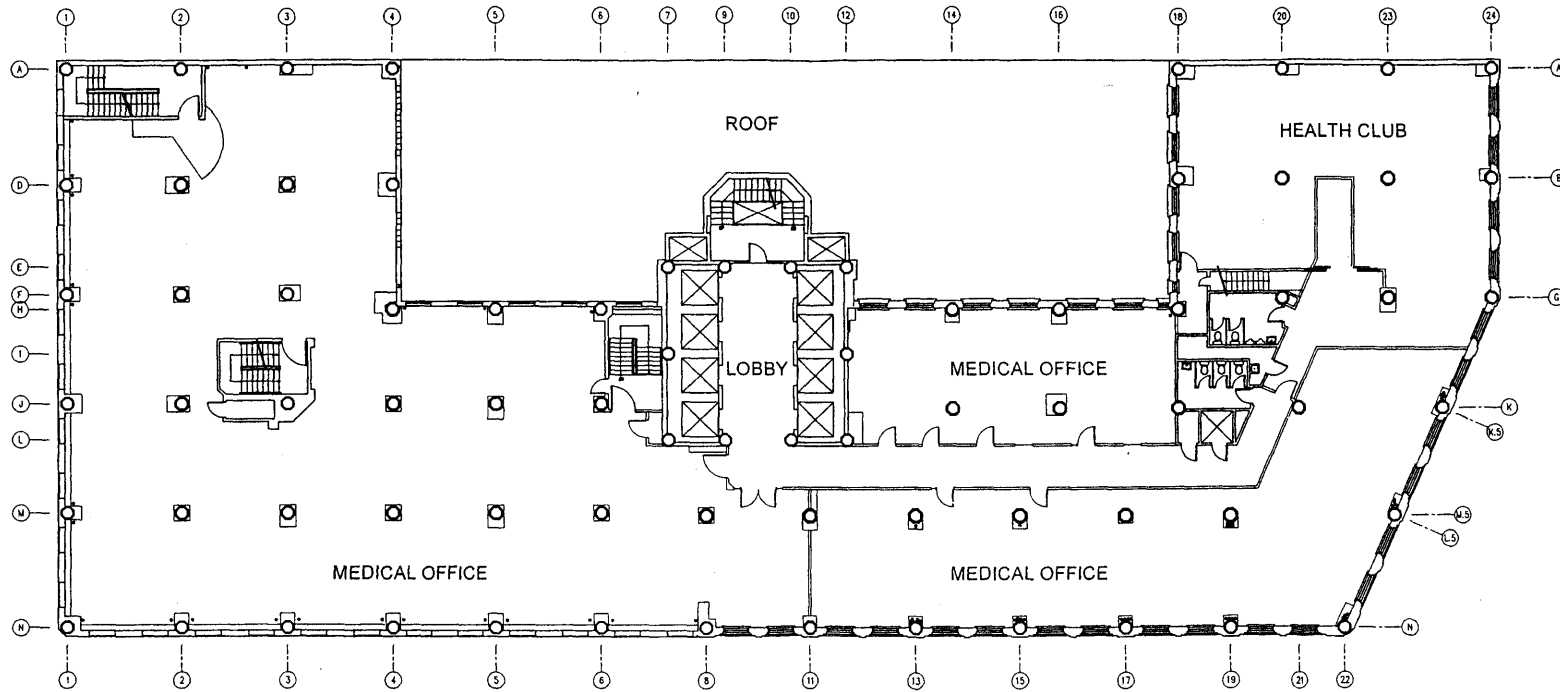
**SECOND FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'



MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101

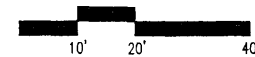


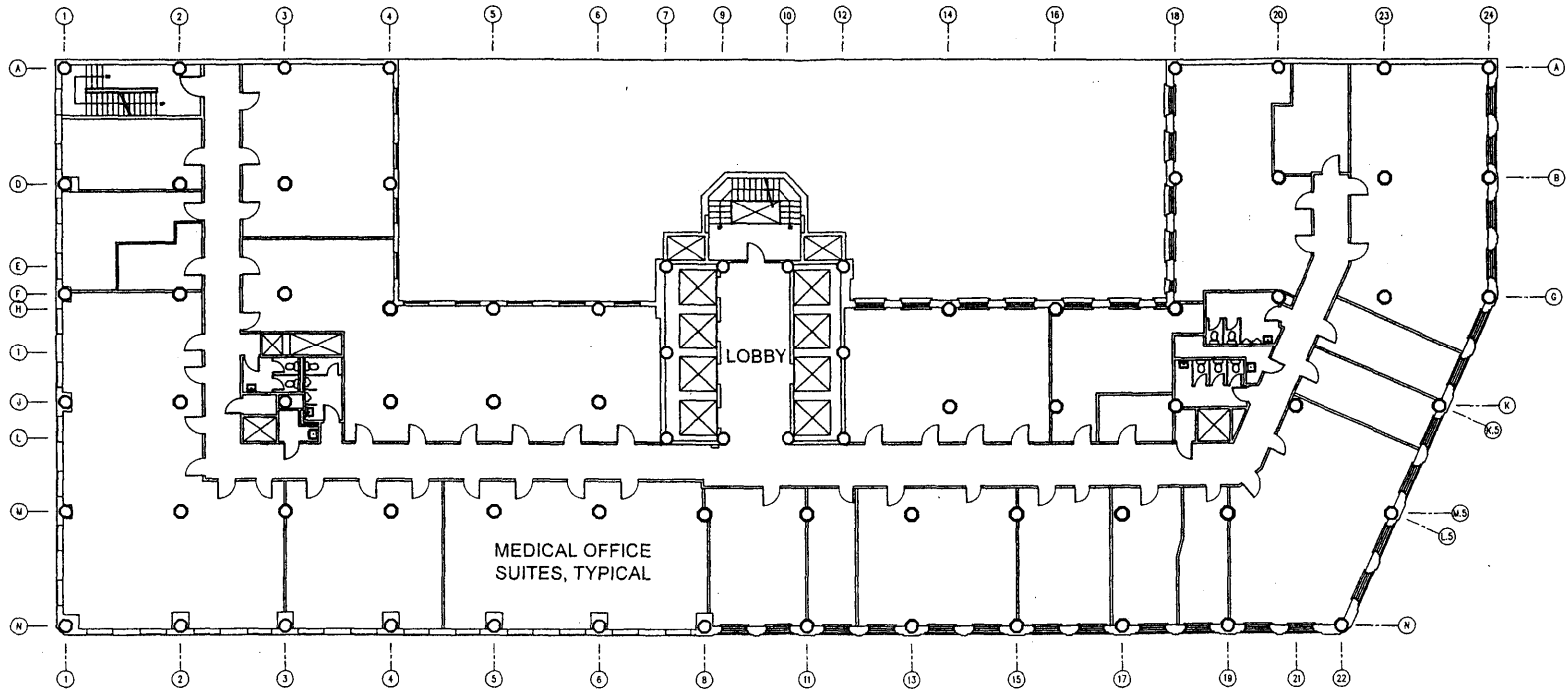


**THIRD FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'

MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101

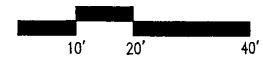


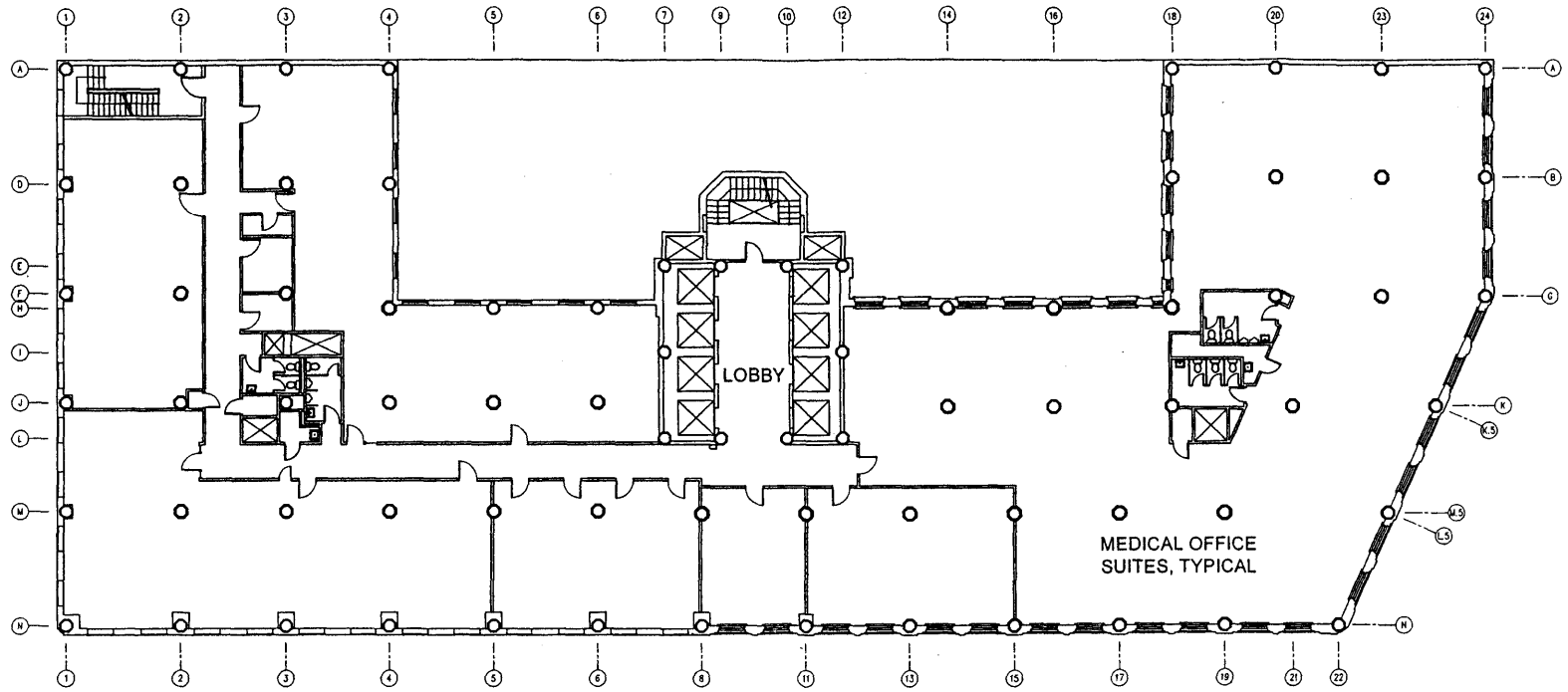


**FOURTH FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'

MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101

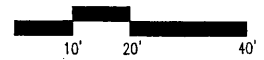


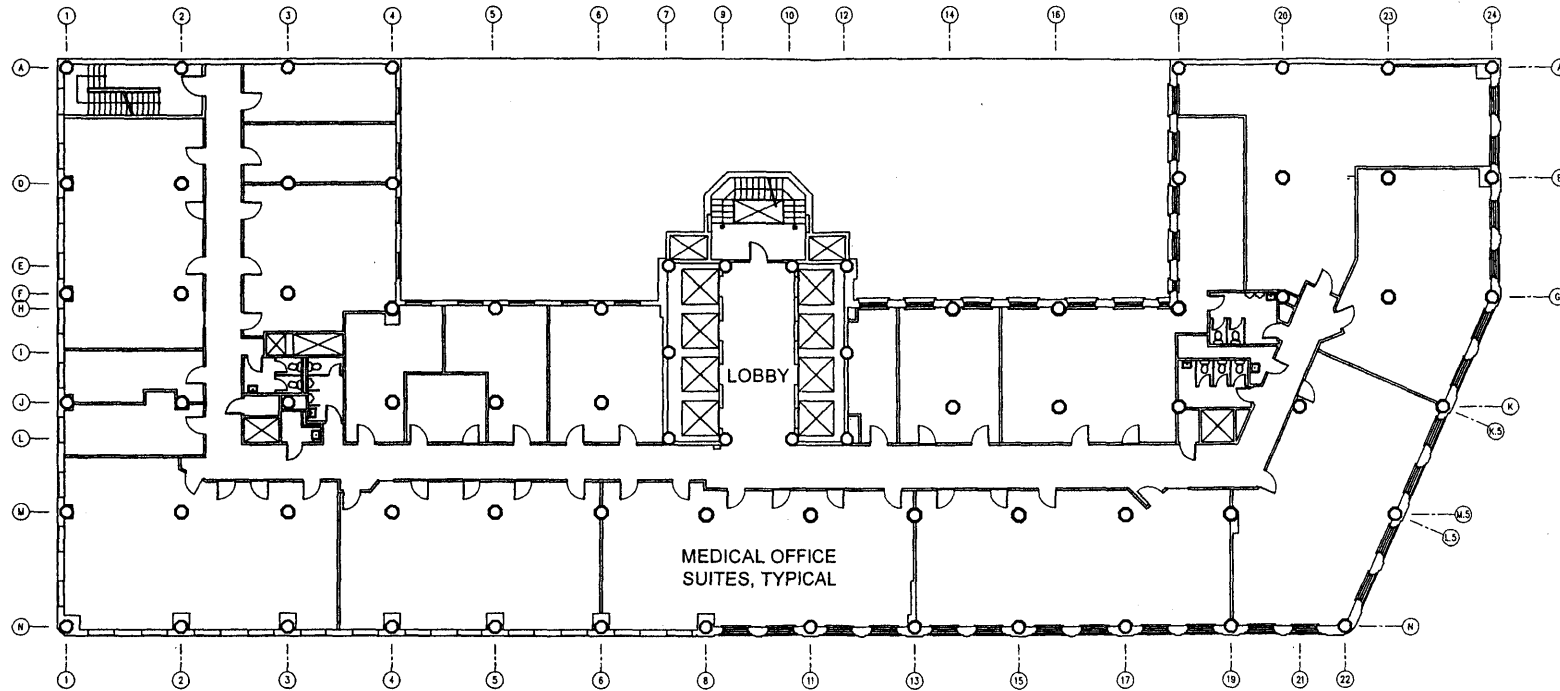


**FIFTH FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'

MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101

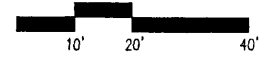


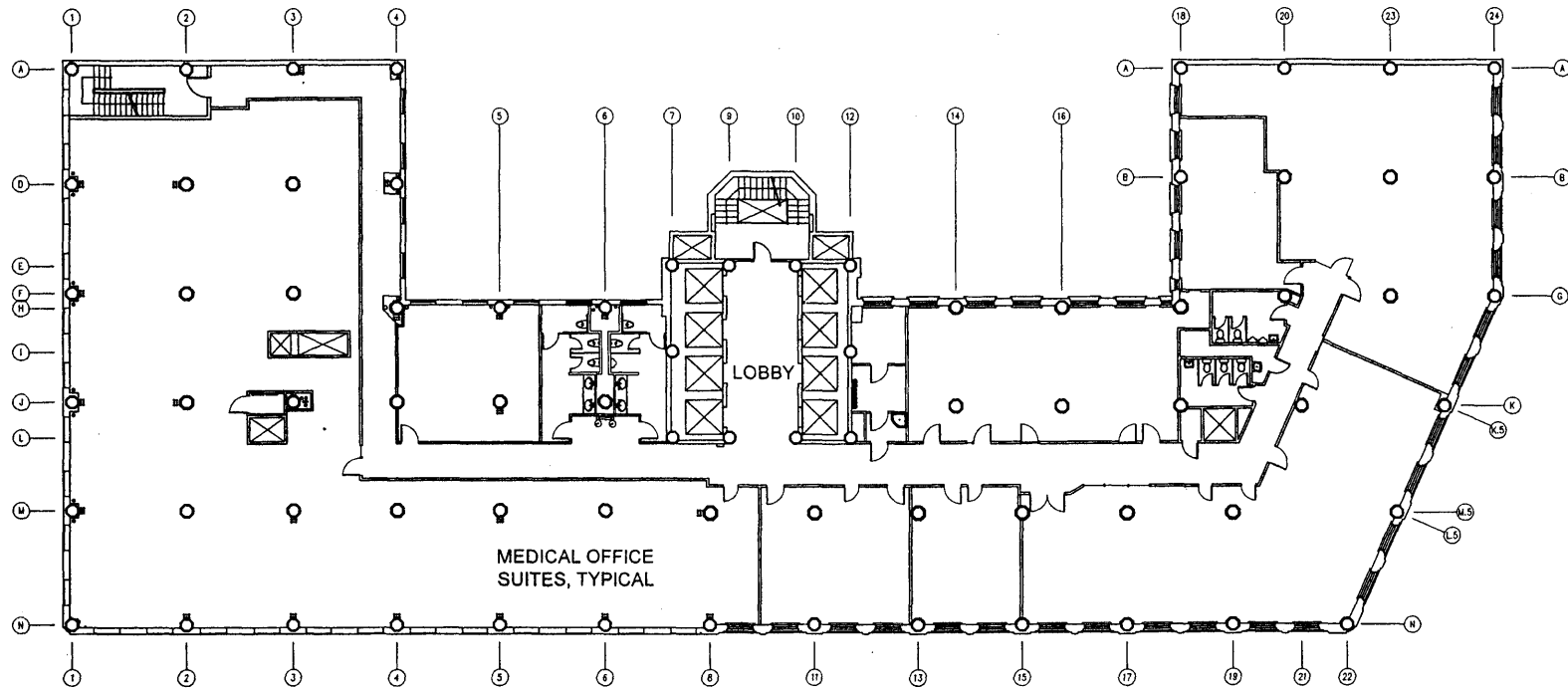


**SIXTH FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'

MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101



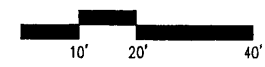


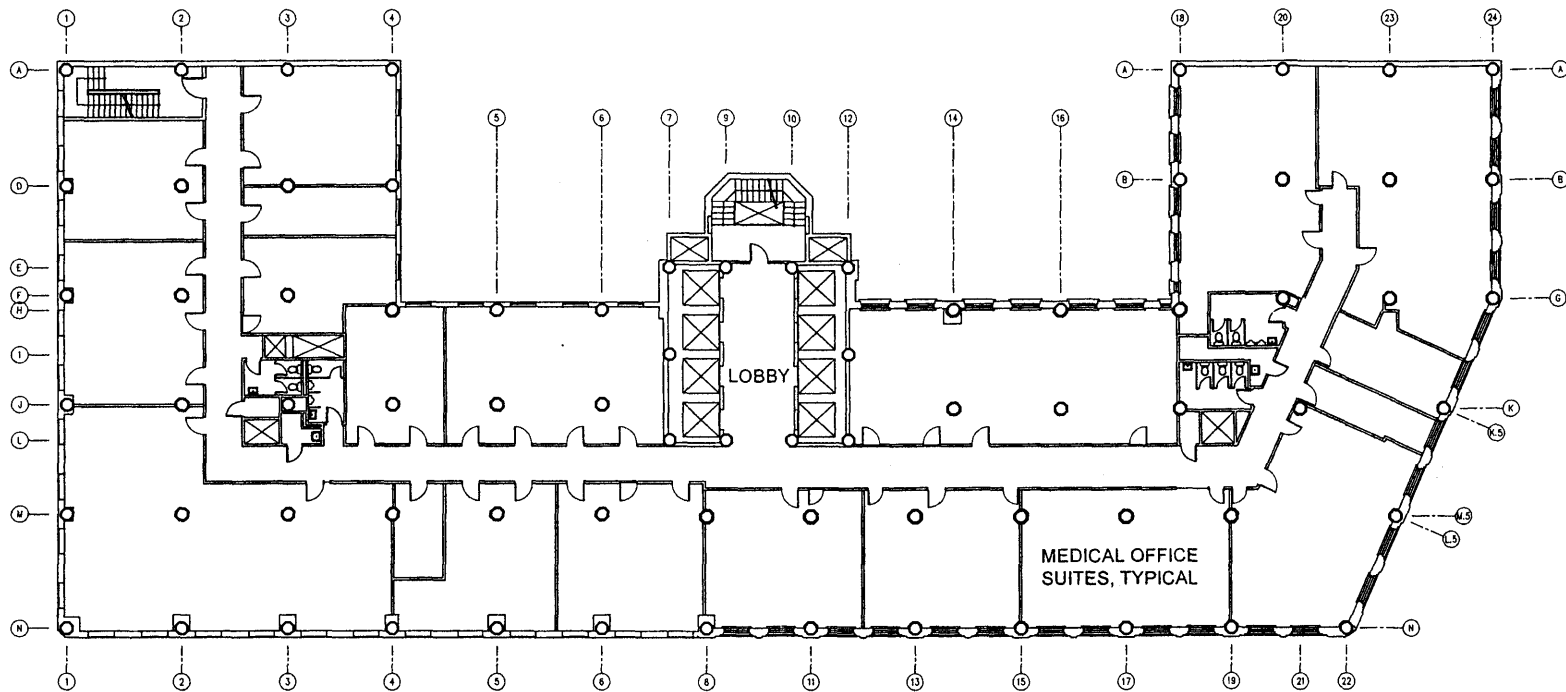
**SEVENTH FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'



MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101

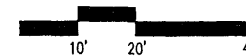


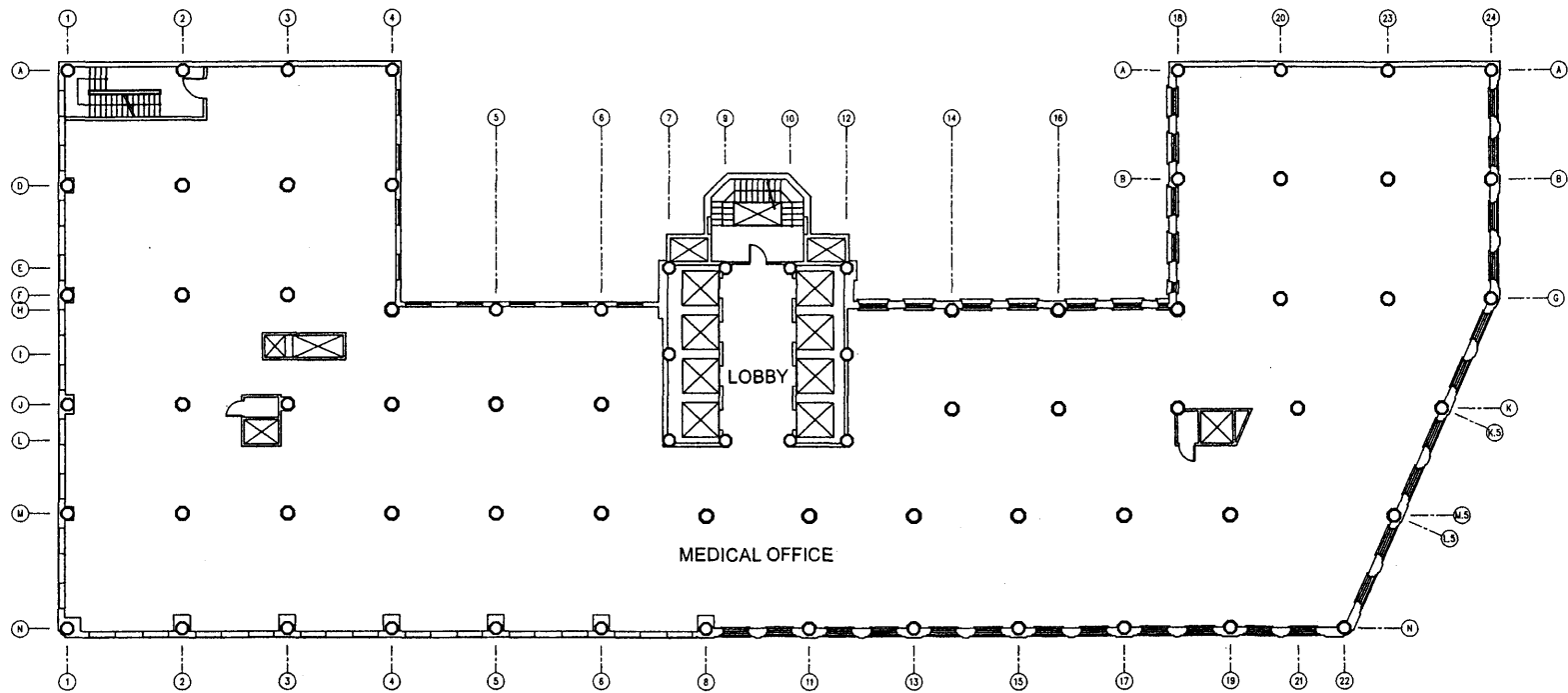


**EIGHTH FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'

MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101

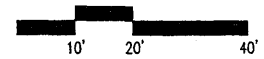


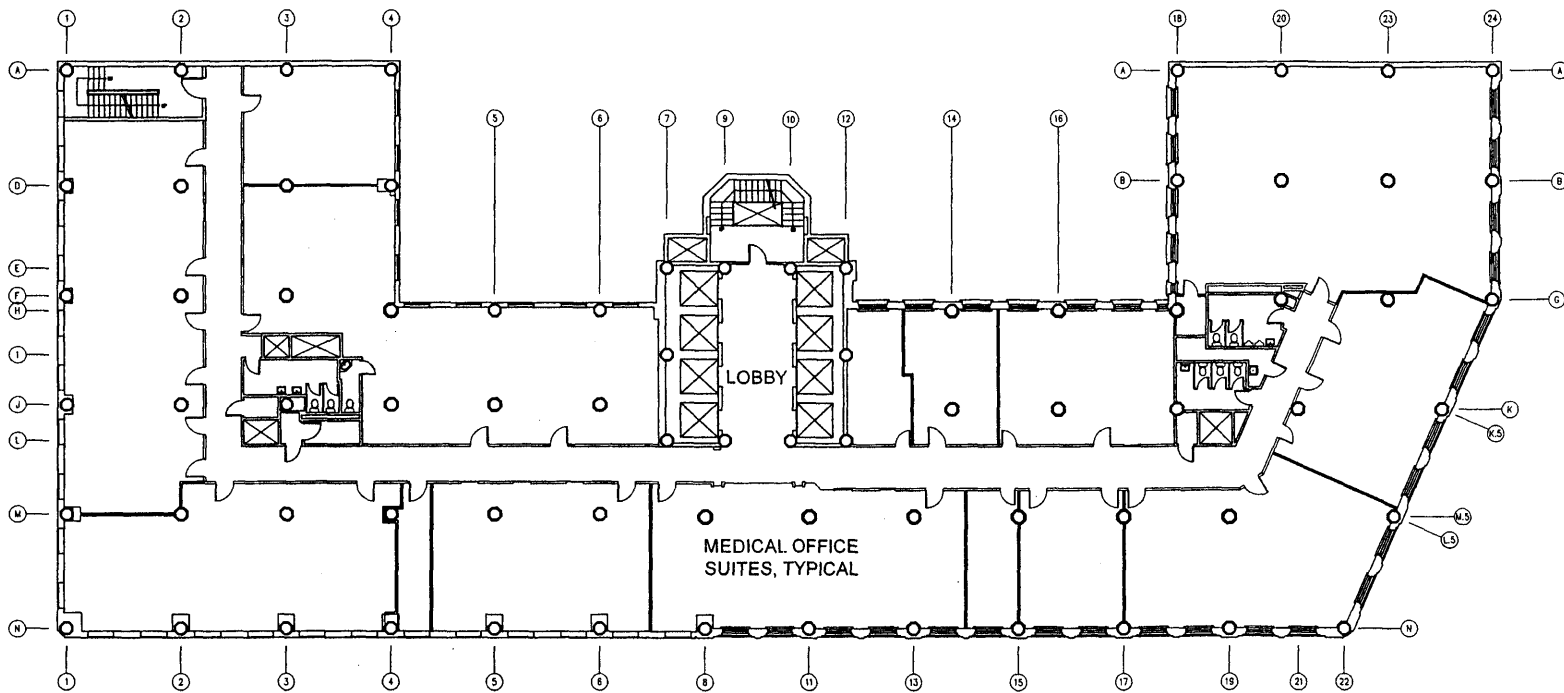


**NINTH FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'

MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101

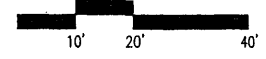


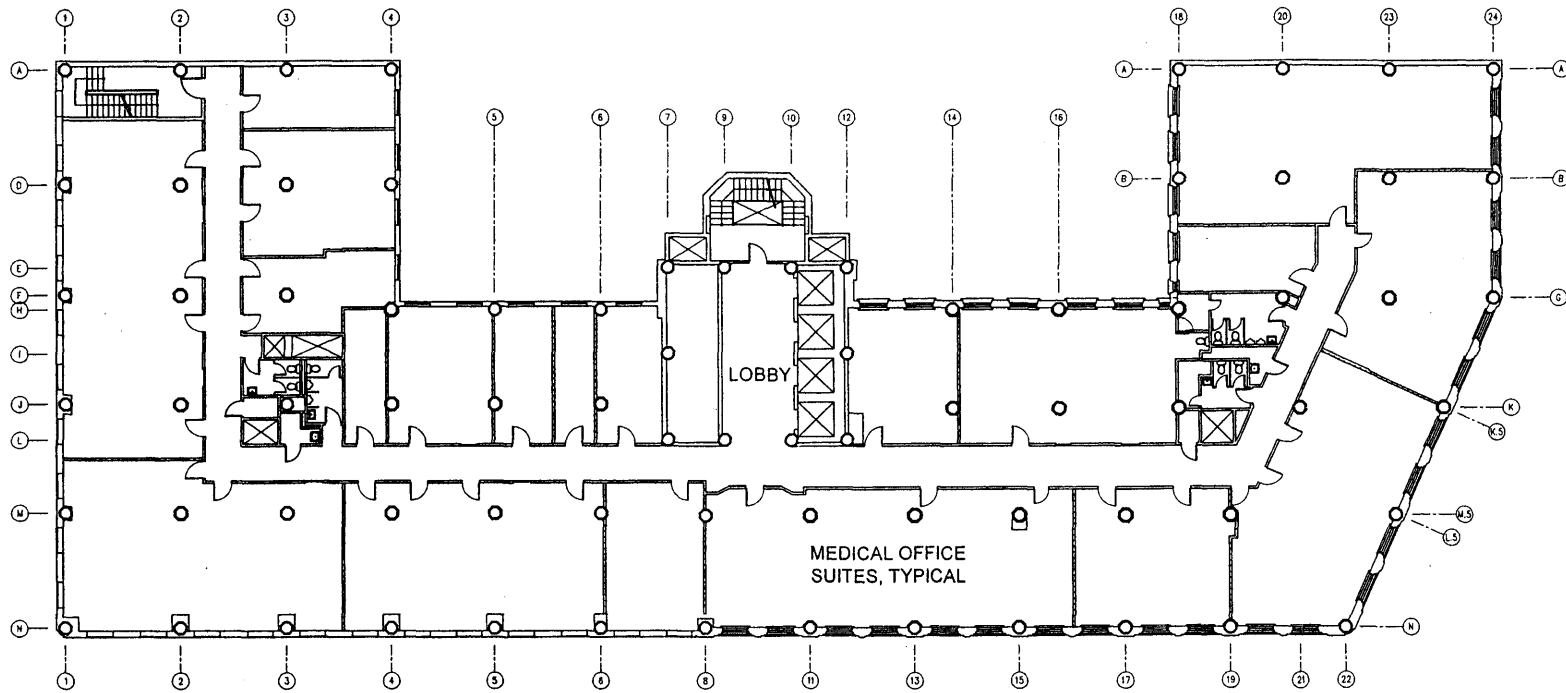


**TENTH FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'

MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101



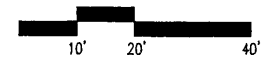


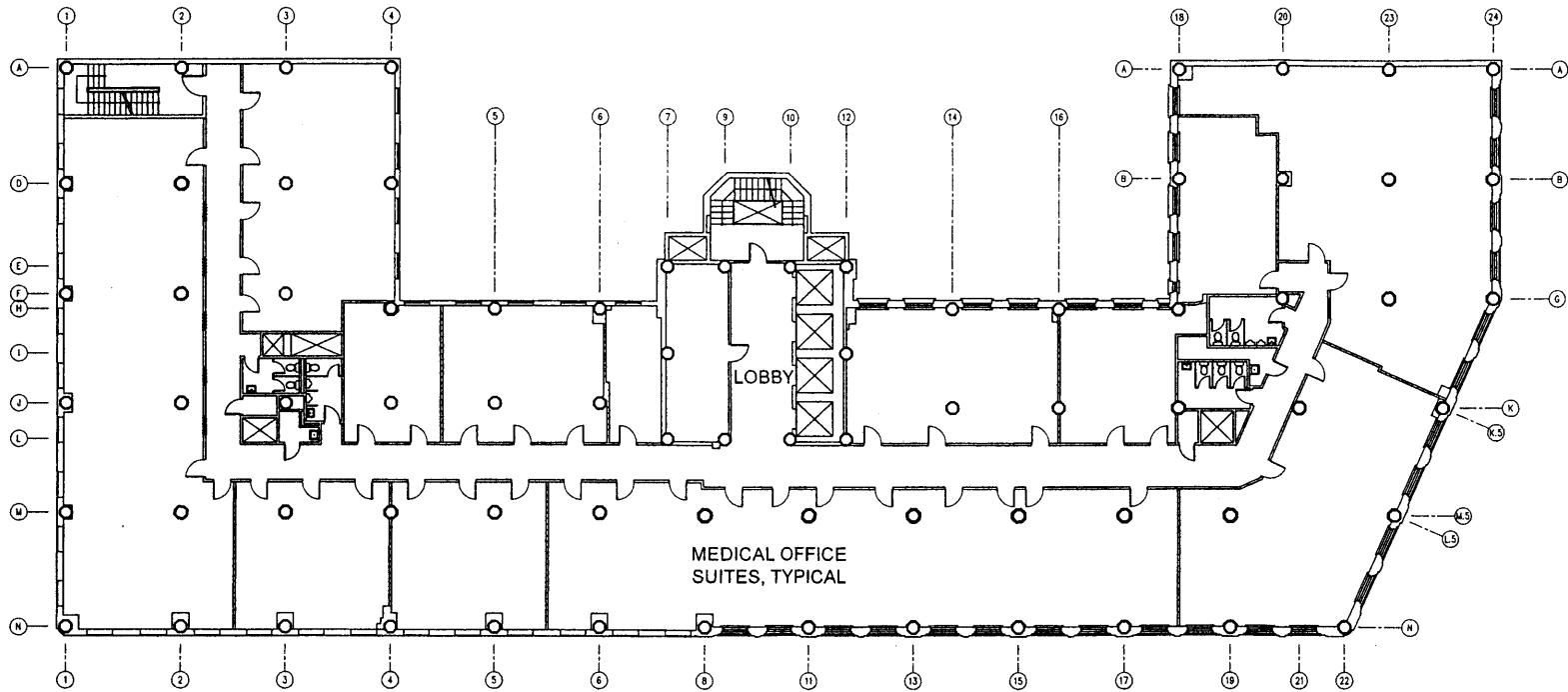
**ELEVENTH FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'



MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101

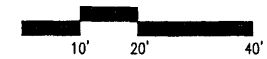


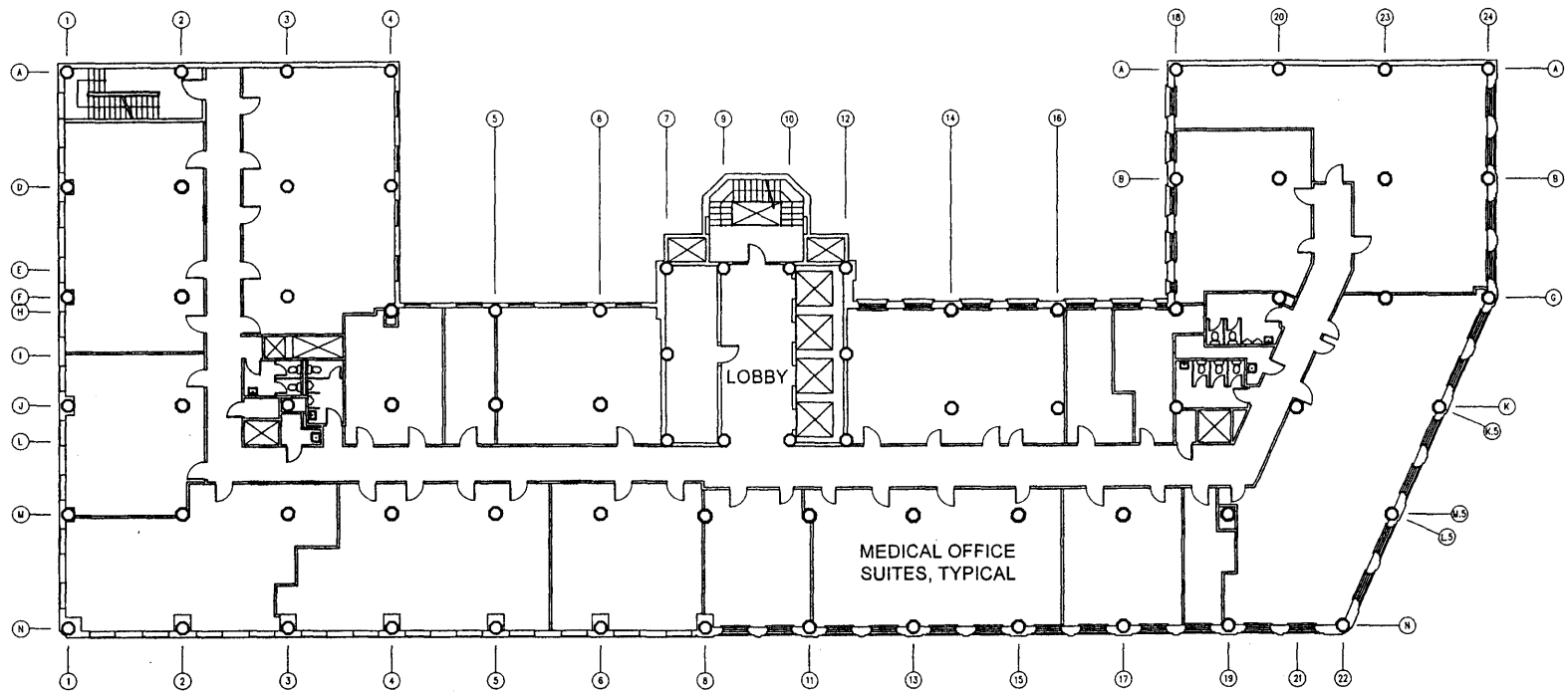


**TWELFTH FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'

MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101

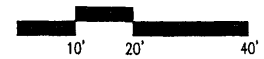


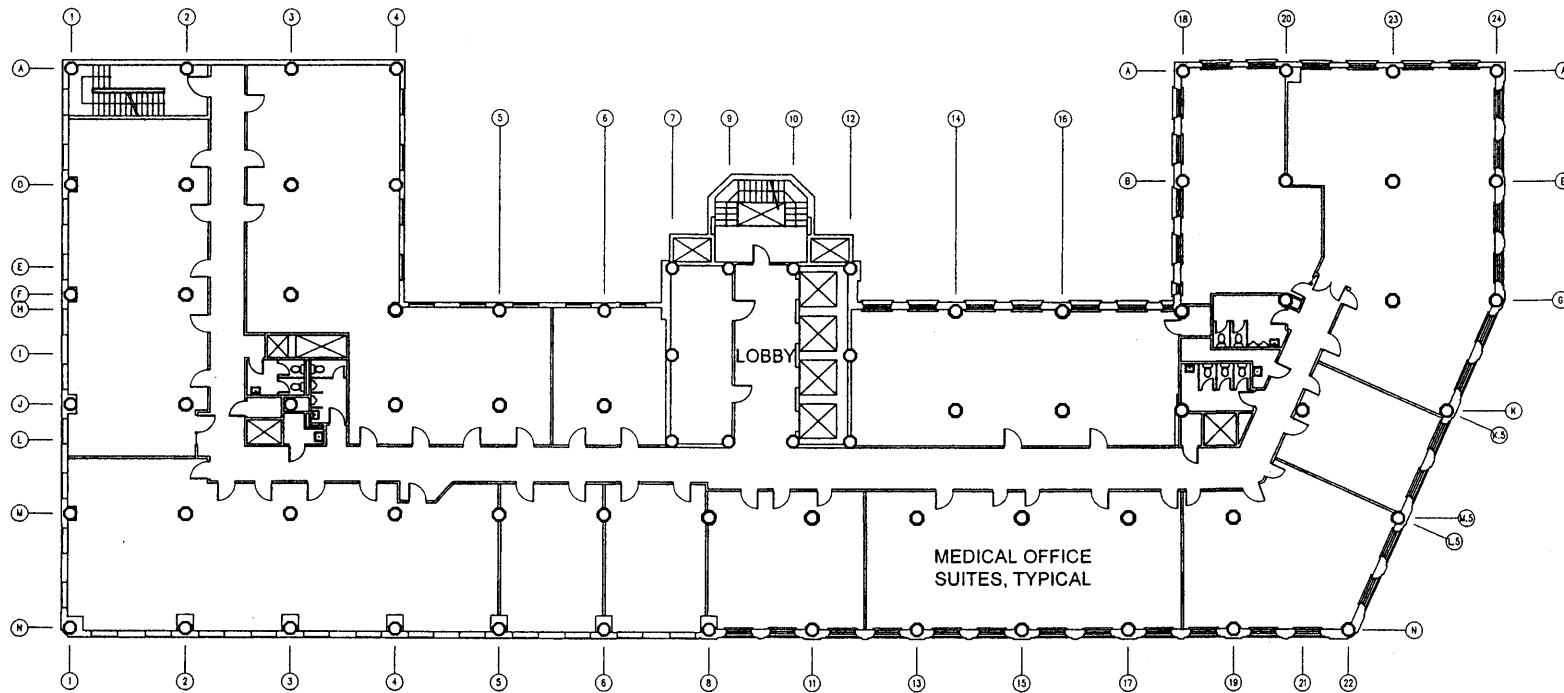


**THIRTEENTH FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'

MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101



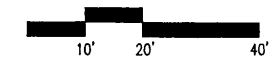


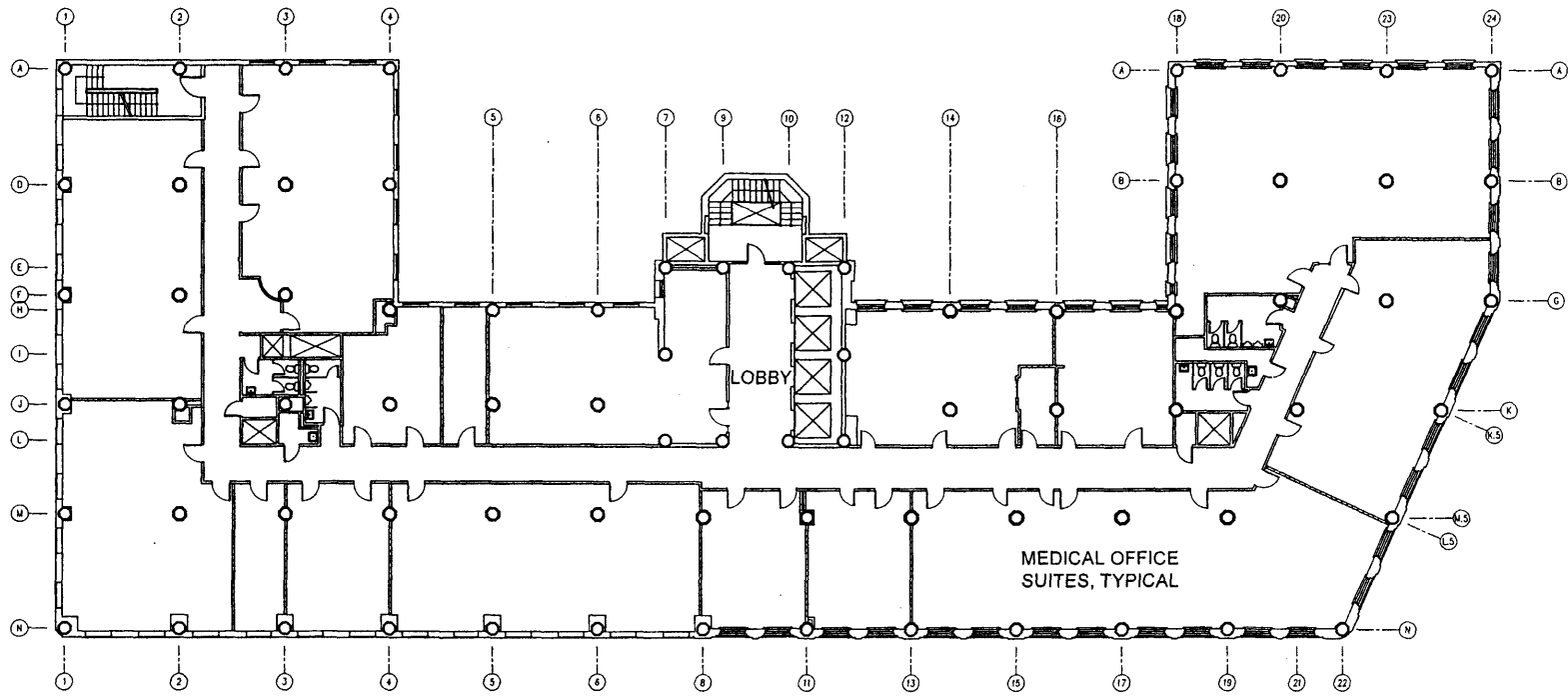
**FOURTEENTH FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'



MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101



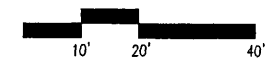


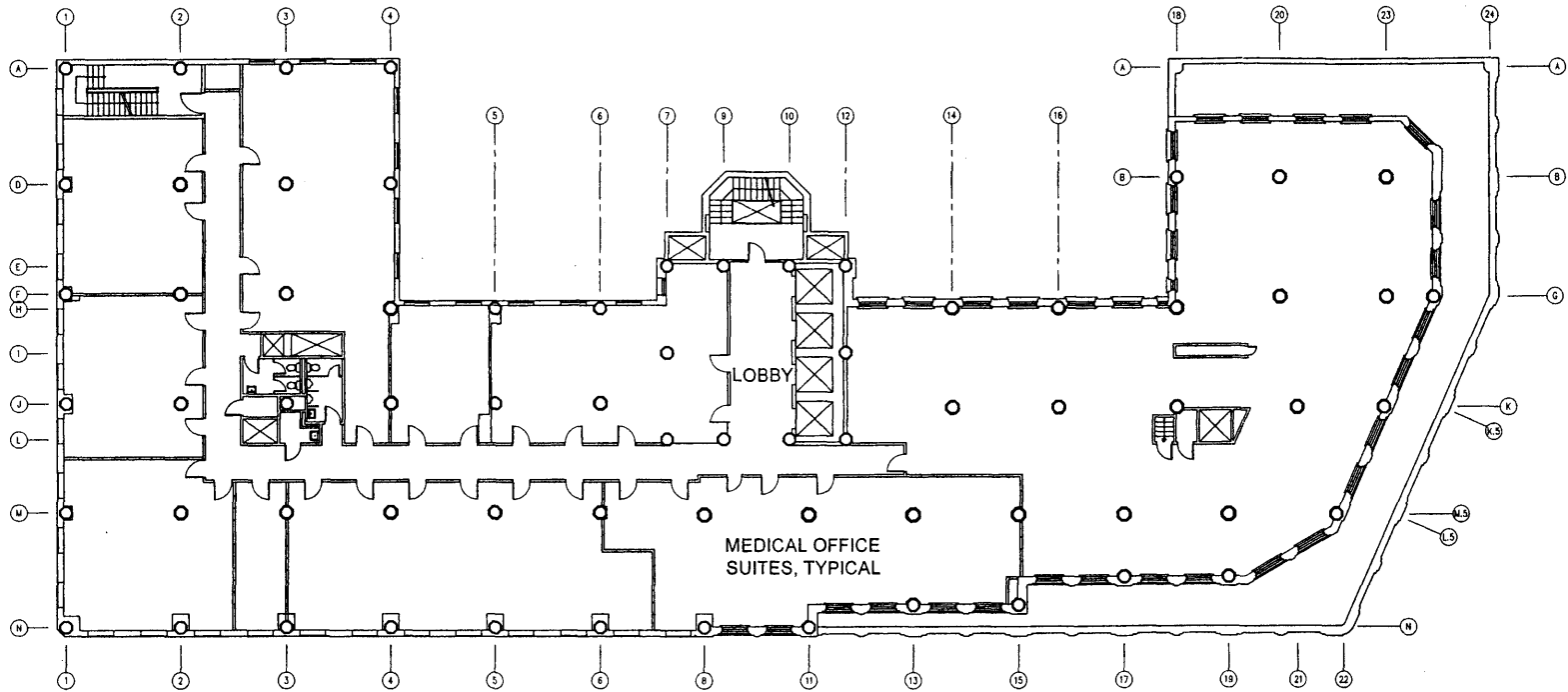
**FIFTEENTH FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'



MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101



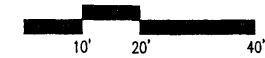


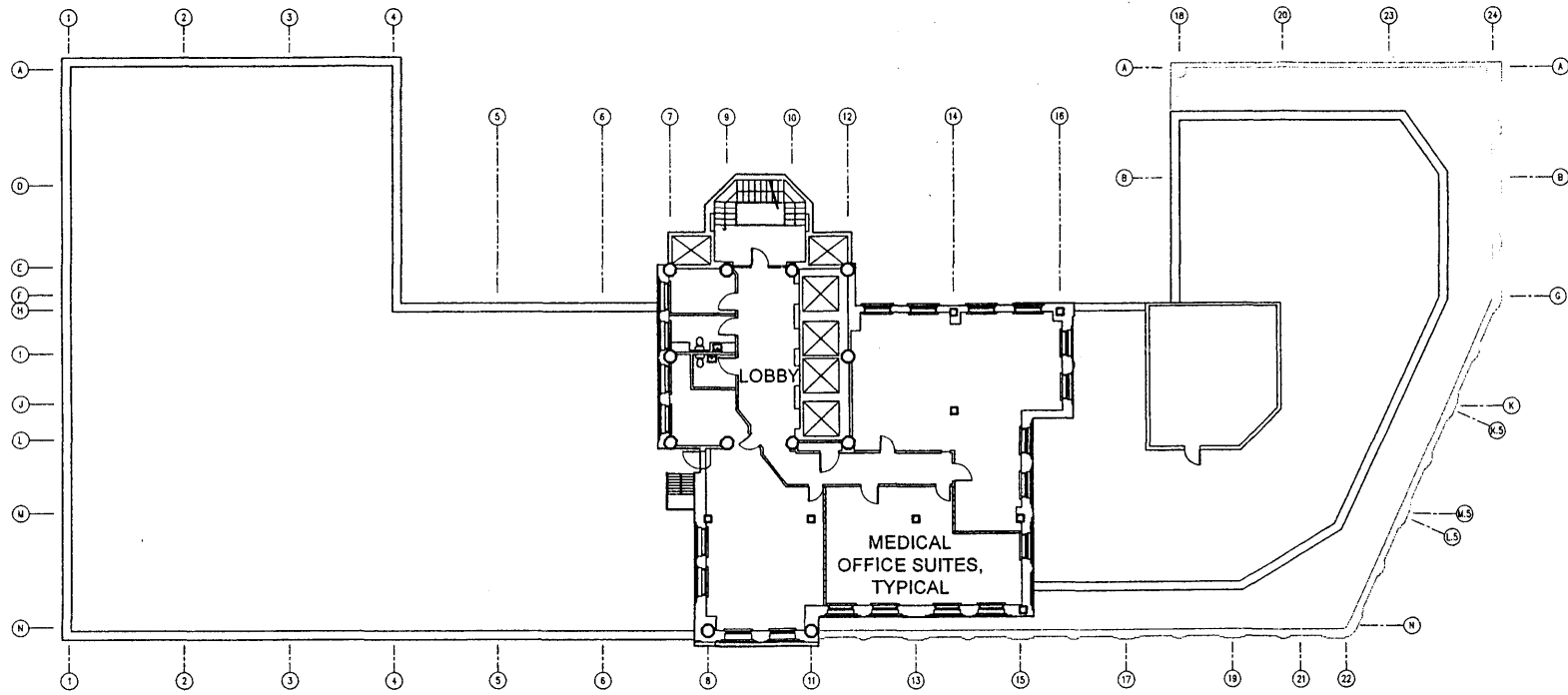
**SIXTEENTH FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'



MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101

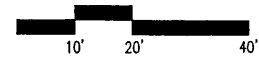


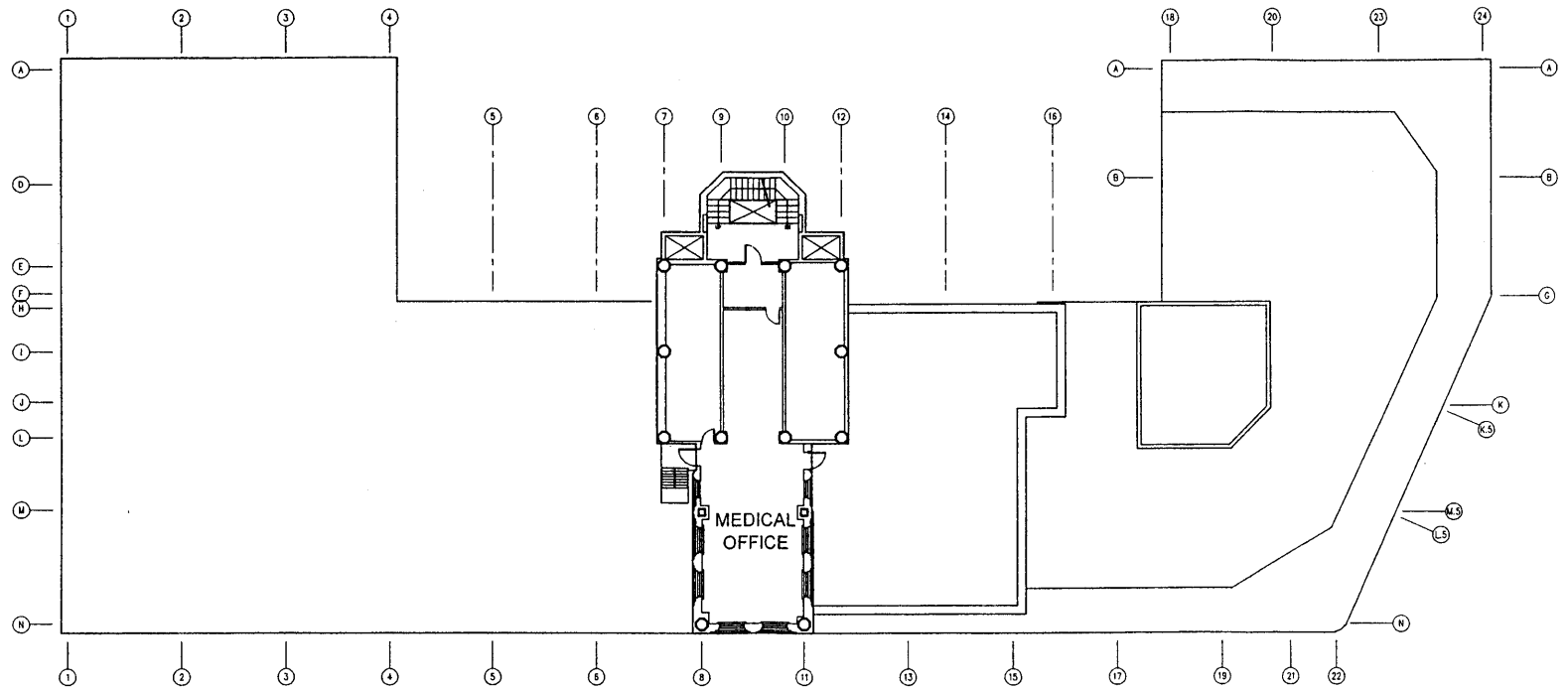


**SEVENTEENTH FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'

MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101



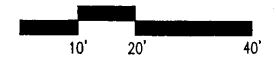


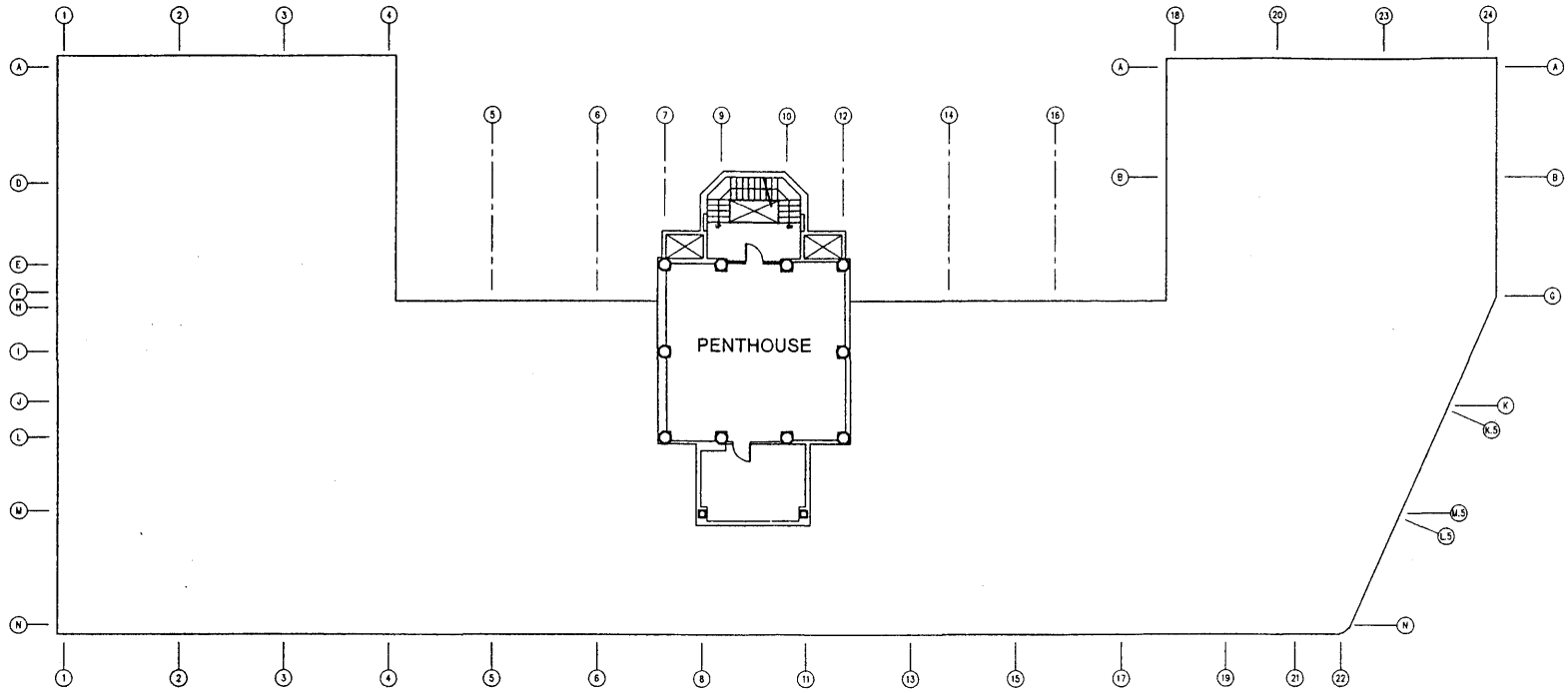
**EIGHTEENTH FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'



MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101

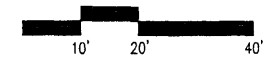




**PENTHOUSE FLOOR PLAN
EXISTING CONDITIONS**

SCALE: 1"=20'

MEDICAL DENTAL BUILDING
509 OLIVE WAY
SEATTLE, WA 98101





THE MEDICAL AND DENTAL BUILDING

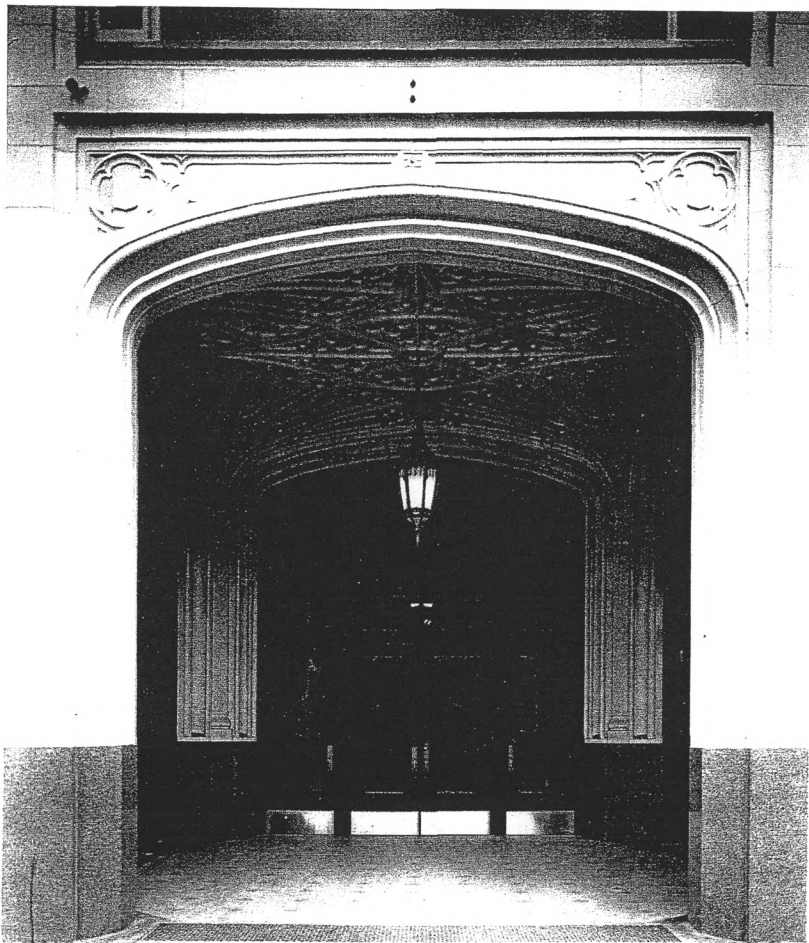


Historic Preservation Certification Application – Part I
MEDICAL DENTAL BUILDING, 509 Olive Way, Seattle, King County, Washington 98101

Historic Photograph c. 1925

Source: Museum of History and Industry, Seattle, PEMCO Webster & Stevens Collection, 83.10.753.2

View: Building exterior from roof of Times Building



Historic Preservation Certification Application – Part I
MEDICAL DENTAL BUILDING, 509 Olive Way, Seattle, King County, Washington 98101

Historic Photograph c. 1925

Source: Museum of History and Industry, Seattle, PEMCO Webster & Stevens Collection, 83.10.412.1

View: Building entry vestibule



Historic Preservation Certification Application – Part I
MEDICAL DENTAL BUILDING, 509 Olive Way, Seattle, King County, Washington 98101

Historic Photograph no date

late 20's

Source: Museum of History and Industry, Seattle, Seattle Post-Intelligencer Collection, PI20891

View: Building exterior with Orpheum Theatre in foreground, Times Building to right and Frederick and Nelson Building at rear



Historic Preservation Certification Application – Part I
MEDICAL DENTAL BUILDING, 509 Olive Way, Seattle, King County, Washington 98101

Historic Photograph December 7, 1949
Source: Museum of History and Industry, Seattle, Seattle Post-Intelligencer Collection, P1120892
View: 1950 addition under construction, view of northeast corner



Historic Preservation Certification Application – Part I
MEDICAL DENTAL BUILDING, 509 Olive Way, Seattle, King County, Washington 98101

Historic Photograph March 31, 1950

Source: Museum of History and Industry, Seattle, Seattle Post-Intelligencer Collection, P1120893
View: 1950 addition under construction, view of north elevation



Historic Preservation Certification Application – Part I
MEDICAL DENTAL BUILDING, 509 Olive Way, Seattle, King County, Washington 98101

Historic Photograph no date
Source: Museum of History and Industry, Seattle, 4156
View: Building exterior with statue of John McGraw in foreground



Historic Preservation Certification Application – Part I
MEDICAL DENTAL BUILDING, 509 Olive Way, Seattle, King County, Washington 98101

Historic Photograph December 27, 1950

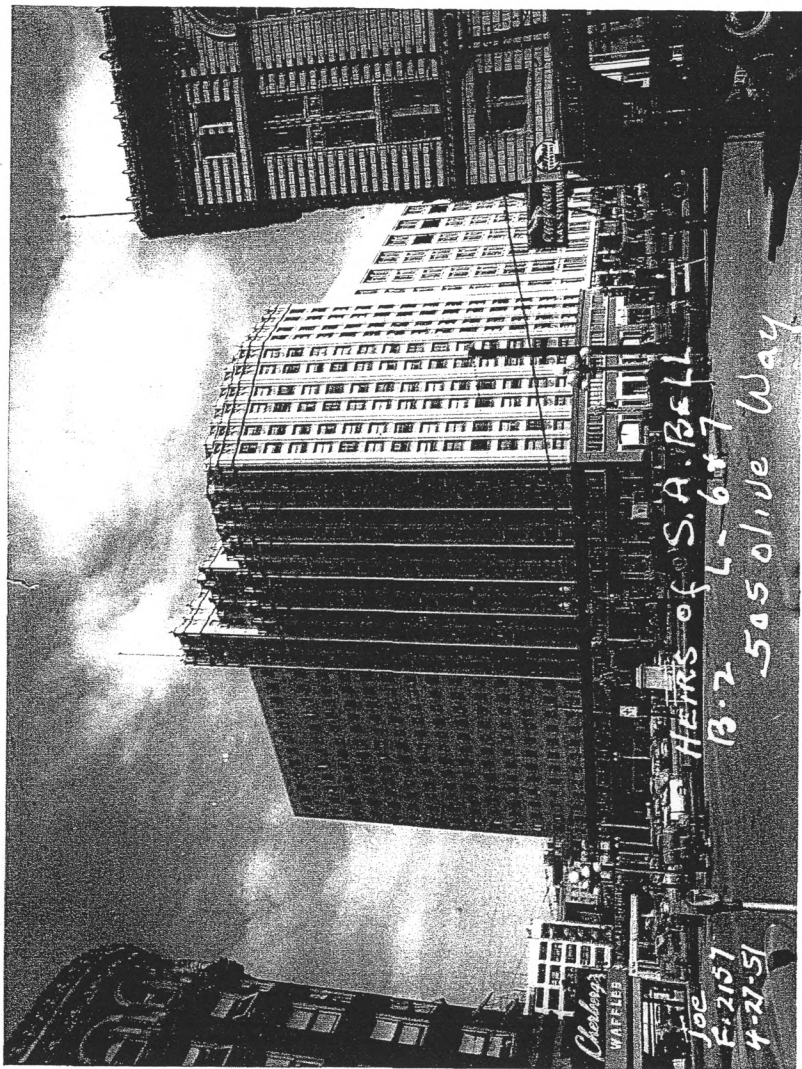
Source: Museum of History and Industry, Seattle, Seattle Post-Intelligencer Collection, PI120898
View: completed addition with ground floor storefronts under construction



Historic Preservation Certification Application – Part I
MEDICAL DENTAL BUILDING, 509 Olive Way, Seattle, King County, Washington 98101

Historic Photograph c. 1945

Source: Seattle Museum of History and Industry, Seattle, PEMCO Webster & Stevens Collection, 8310.12302
View: Building exterior from 5th Avenue



Historic Preservation Certification Application – Part I
MEDICAL DENTAL BUILDING, 509 Olive Way, Seattle, King County, Washington 98101

Historic Photograph April 27, 1951
Source: King County Assessor's Card, Washington State Archives
View: Building exterior with completed addition