

United States Department of the Interior
National Park Service

National Register of Historic Places Registration Form



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This form is for use in nominating or requesting determinations for individual properties and districts. See instructions in National Register Bulletin, *How to Complete the National Register of Historic Places Registration Form*. 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 certification comments, entries, and narrative items on continuation sheets (NPS Form 10-900a).**

1. Name of Property

Historic name Tuscaloosa Veterans Administration Hospital Historic District

Other names/site number Tuscaloosa Veterans Affairs Medical Center / NA

2. Location

street & number 3701 Loop Road East NA not for publication

city of town Tuscaloosa vicinity

State Alabama code AL county Tuscaloosa code 125 zip code 35404

3. State/Federal Agency Certification

As the designated authority under the National Historic Preservation Act, as amended, I hereby certify that this x 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 x meets does not meet the National Register Criteria. I recommend that this property be considered significant at the following level(s) of significance:

 national x statewide local

Kath Achenbach
Signature of certifying official

2/10/12
Date

FPO
Title

VA
State or Federal agency and bureau

In my opinion, the property meets does not meet the National Register criteria.

Elizabeth Ambrose
Signature of commenting official

1 February 2012
Date

State Historic Preservation Officer
Title

Al. Historical Commission
State or Federal agency and bureau

4. National Park Service Certification

I, hereby, certify that this property is:

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

Signature of the Keeper

[Signature]

Date of Action

3/7/12

5. Classification

Ownership of Property
 (Check as many boxes as apply)

<input type="checkbox"/>	private
<input type="checkbox"/>	public - Local
<input type="checkbox"/>	public - State
<input checked="" type="checkbox"/>	public - Federal
<input type="checkbox"/>	private

Category of Property
 (Check only one box)

<input type="checkbox"/>	building(s)
<input checked="" type="checkbox"/>	district
<input type="checkbox"/>	site
<input type="checkbox"/>	structure
<input type="checkbox"/>	building(s)
<input type="checkbox"/>	object

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

Contributing	Noncontributing	
21	8	buildings
0	0	sites
2	2	structures
1	0	objects
24	10	Total

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

Number of contributing resources previously listed in the National Register

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NA

6. Function or Use

Historic Functions
 (Enter categories from instructions)

HEALTH CARE / hospital

Current Functions
 (Enter categories from instructions)

HEALTH CARE / hospital

7. Description

Architectural Classification
 (Enter categories from instructions)

Late 19th and 20th Century Revivals /
 Colonial Revival / Classical Revival

Materials
 (Enter categories from instructions)

foundation: Concrete

walls: Brick

roof: Slate

other: Terra Cotta

Narrative Description

(Describe the historic and current physical appearance of the property. Explain contributing and noncontributing resources if necessary. Begin with a **summary paragraph** that briefly describes the general characteristics of the property, such as its location, setting, size, and significant features.)

Summary Paragraph

The Tuscaloosa Veterans Administration (VA) Hospital Historic District, currently known as the Tuscaloosa Veterans Affairs Medical Center in Tuscaloosa, Alabama, is located at 3701 Loop Road East. Located within a campus setting, the historic district is situated on the southeast side of Loop Road and east of Woodland Road (also known as Hagler Lane) approximately 4.5 miles southeast of downtown Tuscaloosa, the seat of government in Tuscaloosa County. The original and ongoing mission of the medical center is to provide health care to veterans of the United States. Originally constructed as a general medical and surgical hospital, the Tuscaloosa VA Hospital was converted to a neuropsychiatric hospital in 1940. The historic district preserves the characteristics of both sub-types of Second Generation Veterans Hospitals. The property currently contains approximately 120 acres. The Tuscaloosa VA Hospital Historic District encompasses approximately 60 acres and includes thirty-four resources. Twenty-four resources are considered contributing resources, with the majority of these resources classified as buildings. Contributing resources include those that retain integrity and were constructed by the hospital during the historic district's period of significance (1931–1950). Of the thirty-four resources, ten are noncontributing resources. The historic district is composed of a large main building, patient ward/treatment buildings, a recreation building, kitchen/dining hall/boiler house building, residential quarters, and maintenance/utility buildings. One resource with a substantial footprint, the nursing home care unit (Resource 61, 1975), has been added to the historic district after the period of significance. Two other resources, the water tank and tower (Resource 42, circa 1980s–1990s), the education and training building (Resource 63, 1976)/and the ambulatory care building addition (Resource 135, 1987) have also been added to the central core of the historic district after the period of significance. The large water tank and tower (Resource 42, circa 1980s–1990s) is clearly visible from the front of the historic district. The ambulatory care building addition (Resource 135, 1987), which has a substantial footprint, is also visible from the front lawn of the historic district. The campus setting of the historic district consists of mature vegetation, undulating topography, curving drives, and buildings with brick exteriors exhibiting Colonial Revival and Classical Revival architectural styles. Later buildings dating to the second half of the twentieth century exhibit modern, utilitarian designs.

Narrative Description

The Tuscaloosa VA Hospital Historic District is located on a slight rise within a campus setting. The campus originally consisted of approximately 404 acres but has been reduced over the years to its current size of approximately 120 acres. The historic district includes approximately 60 acres of the existing campus. The reduction in land ownership is a common trait among Second Generation Veterans Hospitals because land determined to be surplus was removed from the VA's ownership. The Tuscaloosa VA Hospital was originally designated a general medical and surgical hospital. In 1940 the hospital was redesignated as a neuropsychiatric hospital. The historic district retains characteristics of both Second Generation Veterans Hospitals sub-types.

The buildings located within the Tuscaloosa VA Hospital Historic District share similarities with other Second Generation Veterans Hospitals in both original function and architectural style/decoration, especially to those constructed from the late 1920s through 1950, referred to as Period II. The Tuscaloosa VA Hospital Historic District has a main building (Resource 1, 1931) that serves as the focal point of the historic district. The monumentality and placement of the main building speak to its prominence within the historic district, both visually and functionally. The buildings constructed within the period of significance exhibit Classical Revival and Colonial Revival stylistic influences that were nationally popular at the time. A hierarchy of ornamentation was developed within the historic district organized according to the building's use by the public. The main building (Resource 1) exhibits the most decorative elements of those within the historic district.

(See Continuation Sheet, page 7.1)

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The recreation building (Resource 4, 1931) is the second most ornamentally decorated building within the historic district. The kitchen/dining hall building (Resource 3, 1931) of the Tuscaloosa VA Hospital Historic District, located to the rear of the main building (Resource 1), also contains the boiler house. But similar kitchen/dining hall/boiler house buildings have also been identified at Lexington, Kentucky, and Indianapolis, Indiana, which were both constructed in the same time period as veterans' general medical and surgical hospitals.

The buildings dating to the period of significance reflect classical revival styles utilized throughout Period II (late 1920s through 1950) for Second Generation Veterans Hospitals across the nation. The main building (Resource 1, 1931) and recreation building (Resource 4, 1931) display the highest level of ornamentation of buildings within the historic district. Details of the main building (Resource 1, 1931) include a four-story central pavilion with a triangular terra cotta pediment exhibiting dentils, wreath, and double-swags. The building exhibits terra cotta pilasters, brick quoins, brick banding along the basement and first floor, belt course, and wide cornice. The three bays of the central entrance pavilion are delineated by four engaged columns with capitals. Many windows have terra cotta keystones and sills. The recreation building (Resource 4, 1931) also displays similar detailing but to a lesser degree, such as brick quoins, brick banding along the basement, and terra cotta keystones over the windows. Other buildings of the historic district, including the intermediate care building (Resource 2, 1931) and the residential quarters (Resources 5, 1931; 6, 1931; 7, 1931; 8, 1931; and 15, 1933), reflect some elements of classical revival detailing, but to a lesser extent. They exhibit minimal ornamentation, aside from the symmetrical fenestration, brick exteriors, wood facade door surrounds with pilasters, triangular door pediments, fanlight transoms, cornices with modillions, and gable-roof dormers. The maintenance/utility buildings display little, if any, ornamentation.

The buildings of the Tuscaloosa VA Hospital Historic District are loosely arranged in three clusters according to function: the central core group; the residential quarters; and the maintenance/utility group. The residential quarters group is distanced from the central core group to allow the employees privacy and separation from the workplace. The residences of the Tuscaloosa VA Hospital Historic District are located to the east of the central core group and are oriented to the north, away from the central core group. The historic district is densely developed, with the largest open area to the northwest (front) of the main building (Resource 1, 1931) containing a lawn and mature trees flanking the main entrance drive.

The central core group of buildings is situated on the highest point within the historic district. The central core cluster of buildings consists of the main building (Resource 1, 1931), the intermediate care building (Resource 2, 1931), kitchen/dining hall/boiler plant (Resource 3, 1931), the recreation building (Resource 4, 1931), the education and training building (Resource 63, 1976), ambulatory care building (Resource 135, 1987), and the flag pole (Resource 20, 1933). Similar to most other Second Generation Veterans Hospitals, the monumental main building (Resource 1, 1931) and the flag pole (Resource 20, 1933) serve as the focal points of the Tuscaloosa VA Hospital Historic District. Resources 1, 2, 3, and 4 are connected by enclosed corridors with brick exteriors and windows. Other resources located within the central core cluster include the radial brick chimney (Resource 9, 1931) and an auxiliary power unit (Resource 62, circa 1970s). The central core group of buildings also includes the patient ward/treatment buildings. To the southwest of the central grouping is an H-shape patient building (Resource 38, 1944). To the southeast of the central core group are three patient buildings surrounding a courtyard: two H-buildings (Resources 39 and 40, both 1944) and a single-story, elongated building with short return wings along its facade and rear elevations (Resource 33, 1939). Although the typical Second Generation Veterans Hospital has buildings grouped by function, it is not

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unusual for a hospital campus to have the patient treatment/ward buildings (such as the H-buildings) grouped together into two or more separate clusters. The Tuscaloosa VA Hospital Historic District is unusual in that a single H-building was constructed (Resource 38, 1944) for neuropsychiatric patients with no attempt at the time to build similar treatment buildings to form an enclosed courtyard. Resources 33, 39, and 40 are connected by enclosed corridors with brick exteriors and windows.

The second group of buildings is composed of the residential quarters, located east of the central core group of hospital buildings. The quarters are situated along a drive that loops around from the front to the rear of the residences. The residences all exhibit Colonial Revival architectural ornamentation. The residential buildings, consisting of a former nurses' quarters (Resource 5, 1931), three duplexes (Resources 6, 1931; 7, 1931; and 15, 1933), and the director's residence (Resource 8, 1931), are located in a linear arrangement oriented to the north or northwest. The yards of the residences are filled with mature vegetation. Three garages are associated with the residences (Resources 25, 1932; 27, 1932; and 28, 1936). Other than Resources 7 and 15 serving as transitional homes, the remaining quarters are currently filled with offices. The residences located within the Tuscaloosa VA Hospital Historic District are very similar, if not identical, to those located at other Period II Second Generation Veterans Hospitals. The residences were originally placed to enable employees to easily walk to work but distanced from the medical buildings to provide a private setting. The residential quarters are approximately 400 feet from the main building (Resource 1, 1931). Mature vegetation, including trees and shrubbery, assist in obscuring the residential quarters from direct view of the remainder of the hospital buildings within the historic district.

The maintenance/utility buildings supporting the facility are grouped to the rear, or south/southeast, of the historic district's central core of buildings. This group includes shops and storage facilities (Resources 12, 1931; 17, 1933; 41, 1944; and 142, 1988), the laundry (Resource 18, 1933), a water tank (Resource 42, circa 1980s-1990s), and the chiller building (Resource 138, 1995). The original water tower is no longer extant.

Construction of buildings continued within the historic district after the initial opening of the hospital, including garages (Resources 25, 1932; 27, 1932; and 28, 1936) for the residents and patient ward/treatment buildings (Resources 33, 1939; 38, 1944; 39, 1944; and 40, 1944). While one of the patient ward/treatment buildings (Resource 38) was constructed to the southwest of the main building (Resource 1), the remaining three (Resources 33, 39, and 40) were constructed to the rear of the main building, thus increasing the size of the central core group and placing the original maintenance/utility group between the original and later patient buildings. Maintenance/utility buildings completed after the initial opening include the engineering shops (Resource 17, 1933) and laundry (Resource 18, 1933). Noncontributing maintenance/utility buildings constructed after the period of significance continued to be placed in proximity to the original structures but to the rear of them. Patient facilities built after the period of significance, such as the chapel (Resource 46, 1963) and ambulatory care building (Resource 135, 1987) continued to be constructed in or adjacent to the central core group.

Various small support buildings are found throughout the historic district. The majority of these buildings and structures has been constructed since the 1970s and include emergency generators. Buildings that are known to no longer exist within the historic district include the original water tower (which has been replaced by Resource 42), a greenhouse, and the gatehouse, which was along the main drive near its intersection with Loop Road. The pump house is still extant but appears to no longer be located on hospital property.

Changes to the historic district have taken place after the period of significance, including the removal of the main building's (Resource 1, 1931) cupola. One of the most notable changes to occur within the medical

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center's property was the construction of the four-story psychiatric care building in 1995. The large, four-story psychiatric care building is located outside the historic district boundary to the southwest of one of the neuropsychiatric ward/treatment H-buildings (Resource 38, 1944). Although excluded from the historic district, this large building was constructed in close proximity to the neuropsychiatric ward/treatment building (Resource 38, 1944). The massing of the 1995 psychiatric care building is much larger than the adjacent psychiatric ward/treatment building (Resource 38, 1944). With its placement on a slope, the late-twentieth-century building does not overwhelm the earlier neuropsychiatric ward/treatment H-building (Resource 38, 1944), but its presence impacts the surrounding setting of the historic district. Larger buildings/structures constructed within the historic district after the period of significance include the chapel (Resource 46, 1963), the nursing home care unit (Resource 61, 1975), the education and training building (Resource 63, 1976), the ambulatory care building (Resource 135, 1987), the water tank and tower (Resource 42, circa 1980s–1990s), the chiller building (Resource 138, 1995), and the storage building (Resource 142, 1988). The parking lot to the northwest of the main building (Resource 1, 1931), located in the front lawn, has been constructed and enlarged after the period of significance.

The Tuscaloosa VA Hospital historic district contains approximately 60 acres and is bounded to the north/northwest by Loop Road; to the northeast by the Leroy McAbee, Sr., Activity Center, open lawns, and the Hospice of West Alabama building; to the southeast by a baseball field; to the south by a wooded area; and to the southwest by parking lots, lawns, and the four-story psychiatric care building dating to 1995. The original design plans for the main building (Resource 1, 1931) have the U.S. Veterans Bureau stamp in the corner, suggesting the plans may have been under development before the purchase of the property in November 1930 and the creation of the VA in July 1930.²

Individual Resource Inventory

The numerical designations, dates of construction, and historic or current use of the following resources were provided by the medical center's Engineering Service.³ The numerical designations of the resources were assigned by the VA. The "circa" dates of construction and letter designations were provided by the surveyors for resources without construction dates or numerical labels. All resources that were present during the period of significance and retain integrity are considered contributing resources.

Minor resources that are not substantial in size and scale were not included in the resource count. Resources that were not designated in the resource count include a bus stop, metal storage tanks, underground structures, picnic shelters, a gasoline pump, and an electrical switchgear station.

The period of significance and assessment of contributing and noncontributing resources for this nomination are based on the historic district's significance within the historic contexts developed in the United States Second Generation Veterans Hospitals Multiple Property Documentation Form (MPDF). Resources constructed after 1950, and thus considered noncontributing within this nomination, may possess significance under themes not fully developed as part of the MPDF. Resources located within the medical center campus may be eligible or contributing for other associations or contexts under National Register Criteria A–D, or

² United States Department of Veterans Affairs, files of the Engineering Service, Tuscaloosa Veterans Affairs Medical Center, Tuscaloosa, Alabama.

³ United States Department of Veterans Affairs, files of the Engineering Service, Tuscaloosa Veterans Affairs Medical Center, Tuscaloosa, Alabama.

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recent buildings/structures may be eligible under Criteria Consideration G, for resources of exceptional importance that are less than 50 years of age.

Resource #	Date of Construction	Contributing (C) /Noncontributing (NC)	Historic or Current Use
1	1931	C	Main Building
2	1931	C	Intermediate Care Building
3	1931	C	Kitchen/dining hall/boiler plant
4	1931	C	Recreation Building
5	1931	C	Nurses Quarters
6	1931	C	Duplex Quarters
7	1931	C	Duplex Quarters
8	1931	C	Director's Quarters
9	1931	C	Radial brick chimney
12	1931	C	Warehouse
14	1931	C	Gas Meter House
15	1933	C	Duplex Quarters
17	1933	C	Engineering Shops Building
18	1933	C	Laundry
20	1933	C	Flag Pole
25	1932	C	Four-Bay Garage
27	1932	C	Sixteen-Bay Garage
28	1936	C	One-Bay Garage
33	1939	C	Psychiatric Ward/Treatment
38	1944	C	Psychiatric Ward/Treatment
39	1944	C	Psychiatric Ward/Treatment
40	1944	C	Psychiatric Ward/Treatment
41	1944	C	Shops and Garage Building
42	Circa 1980s-1990s	NC	Water Tank & Tower
46	1963	NC	Chapel
61	1975	NC	Nursing Home Care Unit
62	Circa 1970s	NC	Auxiliary Power Unit Building
63 and 135	1976 and 1987	NC	Education and Training Building and the Ambulatory Care Building Addition
138	1995	NC	Chiller Building
140	Circa 1990s	NC	Generator Building
142	1988	NC	Storage
A	Circa 1960s-1970s	NC	Small Brick Building
B	Circa 1930s-1940s	C	Connecting Corridors
C	Circa 1960s-2000s	NC	Connecting Corridors

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Resource 1. Main Building. 1931. Contributing building.

Resource 1, the main building (1931), is the most prominently-sited and architecturally-distinctive building within the historic district. It faces northwest toward Loop Road and is located on a rise with a lawn to the front of the building. The main building (Resource 1, 1931) is designed in the Colonial Revival style with Classical Revival elements typical of many Period II Second Generation Veterans Hospitals. It appears to be nearly identical to the main building of the Lexington, Kentucky, Second Generation Veterans Hospital, which was constructed in 1930. Overall, the main building (Resource 1, 1931) is four stories on a raised basement. The main hip-roof mass is nineteen bays wide with three-story, three-bay, flat-roof wings at both side elevations and three-story, three-bay, flat-roof return wings extending forward and to the rear from the three outer bays of the hip roof portion of the building, creating an overall H-shape. The entire building is clad in brick and accentuated with terra cotta details. The roof is covered with slate shingles.

The symmetrical facade of the main building (Resource 1, 1931) is distinguished by the elaborate terra cotta treatment of the projecting pavilion. The bays are divided by architectural terra cotta pilasters extending from the second to the fourth floors. The pilasters are topped with Composite order capitals, and support the pavilion's terra cotta entablature and pediment. The pediment's tympanum exhibits festoons and an oculus encompassed by a wreath. Egg-and-dart molding and dentils are found below the cornice and within the tympanum of the central pavilion. The central pavilion's third story windows have jack arches and keystones while the second story exhibits window hoods and exaggerated keystones. The first story of the central pavillion is clad in terra cotta banding that appears to be coursed, rusticated stone. A raised porch with double curving staircases and a terra cotta balustrade spans the three central bays and provides access to the building's main entrance. Originally, there were three facade entries set into semi-circular arches, but currently the two outer arches contain windows. All three openings maintain their original detailing. A stylized urn flanked by volutes and capped by a festoon fill the arches above the openings. Each is trimmed with terra cotta panel reveals and egg-and-dart molding. The central bay contains double-leaf, aluminum frame commercial doors, and the other bays contain aluminum frame windows with air conditioners below. A wood and copper cupola originally towered over the central pavilion but has since been removed. This cupola rested on an octagonal drum supported by a square base centered above the central pavilion. The drum and base of the non-extant cupola are clad in brick. The corners of the square cupola base have niches supporting terra cotta urns.

The brick exterior of the main building (Resource 1, 1931) is laid in five course common bond along the upper three stories. The basement and first floor of the building exhibits brick banding comprised of five courses of projecting stretchers alternating with a recessed course of headers or stretchers. This same brick scheme is found throughout Resource 1, including the return and end wings. Brick quoins decorate the corners of the building. Two terra cotta stringcourses delineate the basement and first floor and the first and second floors. A wide terra cotta entablature with dentil molding encompasses the majority of the building, including the return and end wings, over the third floor windows. The first and second story windows of the main block and wings have terra cotta jack arches and keystones, and all windows have terra cotta sills. The majority of windows throughout the building have replacement four-over-four-light double-hung sashes. Four hip-roof dormers flank the former location of the cupola along both the facade and rear elevations. A similar dormer is also located at the southeast and northwest elevations of the roof.

Three-story return wings extend from the outer three bays of the hip-roof portion of the building. The projections have similar construction details to the main block. The first-story windows on the end of the wings are set into brick arches with terra cotta keystones, and the second and third story bays are defined by terra cotta Tuscan

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pilasters. Three-story, flat-roof end wings are similar in detailing to these facade projections. Pilasters are located along the three elevations of these end wings, with paired windows on the second and third floors of the end elevations. Copper panels separate the second and third story windows between the pilasters.

Return wings are found on the rear elevation of the main block, opposite the facade return wings. The rear return wings are longer than those along the facade, and a shorter three-story wing extends opposite the central pavillion. The rear elevation has little decorative detailing, other than brick banding, quoins, a water table, and stringcourse.

Resource 2. Intermediate Care Building. 1931. Contributing building.

The intermediate care building (Resource 2, 1931) is located in the central cluster of buildings to the southwest of the main building (Resource 1, 1931), with its facade oriented northwest toward the education and training building (Resource 63, 1976). It is a three-story, thirteen-bay, hip-roof building with a three-bay, projecting, central pedimented pavillion along the facade and a three-story, central hip-roof wing to the rear. Like the main building (Resource 1, 1931), the intermediate care building (Resource 2, 1931) is clad in five-course common bond brick with brick bands wrapping the first story. Brick quoins adorn the corners, and the building is encompassed by a terra cotta-clad foundation, a terra cotta stringcourse between the first and second stories, and a terra cotta cornice. The windows are enhanced with terra cotta sills and brick jack arches, and the first story windows of the facade and the windows of the central pavillion are crowned with terra cotta keystones. The majority of windows throughout the building have replacement four-over-four-light double-hung sashes. Overall the central pavillion is relatively simple in its styling. The central bay projects slightly farther than the two flanking bays and is trimmed with brick quoins. The small pediment above this central bay contains a lunette with a terra cotta keystone. The main entryway is framed by a surround of wood fluted pilasters topped with an entablature with dentils. It contains a replacement metal frame door, transom, and sidelights, and is sheltered by a flat-roof metal awning that connects to the education and training building (Resource 63, 1976). Connecting corridors (Resource B, circa 1930s–1940s) extend from the side elevations of the intermediate care building (Resource 2, 1931) to the psychiatric ward/treatment building (Resource 38, 1944), the main building (Resource 1, 1931), kitchen/dining hall/boiler plant (Resource 3, 1931), and the recreation building (Resource 4, 1931).

The rear elevation and wing are treated the same as the facade, except that the last bays of the southwest and rear elevations of the wing have large window openings on the second and third floors. These are filled with modern metal frame, six-light windows. Each oversized window has a terra cotta sill and brick jack arch as is typical. This section may previously have served as an open porch. A hip-roof credit union drive-through canopy with banded brick columns has been constructed behind the rear wing.

Resource 3. Kitchen/Dining Hall/Boiler Plant. 1931. Contributing building.

The kitchen/dining hall/boiler plant (Resource 3, 1931) is located within the central core group of buildings to the southeast of the main building (Resource 1, 1931). The main block of the kitchen/dining hall/boiler plant (Resource 3, 1931) is a three-story, six-bay, hip-roof mass with a central rear wing. Flat-roof sections of varying heights encompass three elevations of the main block, probably relating to earlier functions housed in the building. These earlier functions may have related to the kitchen, dining hall, boiler plant, garage, and loading docks for fuel/foodstuffs. Currently the building serves as the boiler plant and for storage. Buildings of similar design and original functions have been identified at both the Lexington, Kentucky (1931), and Indianapolis, Indiana (1931), Second Generation Veterans Hospitals, which both originally served as general medical and

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surgical hospitals. A two-story corridor extending from the intermediate care building (Resource 2, 1931) to the recreation building (Resource 4, 1931) obscures the first and second stories of the facade of the kitchen/dining hall/boiler plant (Resource 3, 1931). It is evident, however, that the kitchen/dining hall/boiler plant (Resource 3, 1931) exhibits many of the same Colonial Revival design elements found in the historic district's other buildings, including five-course common bond brickwork with brick banding on the first floor, replacement double-hung sashes in window openings adorned with brick jack arches and terra cotta sills, a terra cotta cornice, arched dormers, and the main block's slate roof. The building, particularly the rear flat-roof section, has elements typical of a boiler plant, including oversized window openings on the first story with three stacked sets of replacement sashes. Also visible along the original flat-roof portions of the kitchen/dining hall/boiler plant (Resource 3, 1931) are window bays enclosed with brick and vehicular bays modified to accommodate windows or pedestrian entries. Resource 9, the radial chimney (1931), is located to the rear of the building. A large, two-story, flat-roof addition with many of its upper floor windows enclosed by brick is located along the southwest elevation of the kitchen/dining hall/boiler plant (Resource 3, 1931). This utilitarian addition has few decorative details but exhibits replacement double-hung window sashes, brick jack arches, concrete window sills, and has a brick exterior of five-course common bond. The addition, although large, does not detract from the identifying characteristics commonly associated with the kitchen/dining hall building found at Period II Second Generation Veterans Hospitals, including the placement of the resource to the rear of the main building; hip or gable-roof configuration of the main mass of the resource; scale of the resource in relation to other historic district buildings; and Colonial Revival detailing and materials exhibited by this and other resources within the historic district.

Resource 4. Recreation Building. 1931. Contributing building.

Resource 4, the recreation building (1931), is located in the central core group of the historic district to the east of the main building (Resource 1, 1931). The two-story, front-gable building with a raised basement is three bays in width with its main entry sheltered by a two-story, flat-roof portico along the northwest gable end. The portico, spanning the facade, is three large brick arches wide and one arch deep. The corners and bays are defined by terra cotta pilasters. It is topped with a wood balustrade with an "X" motif. A metal railing surrounds the deck of the portico and the stairs leading up to it. The central entrance is through double-leaf, six-light, wood doors topped with a five-light transom and flanked by fluted pilasters supporting an entablature and pediment. The window to the left of the doorway is bricked in, while the window to the right and the second story windows contain six-over-six-light double-hung wood sashes. The building exhibits typical Colonial Revival and Classical Revival materials and detailing including five-course common bond brickwork; brick banding along the basement story; brick quoins at the corners; a terra cotta water table between the basement and first floor; terra cotta window sills, brick jack arches, and large terra cotta keystones; decorative terra cotta panels with swag designs; a wooden cornice with a brick soldier course below; a slate shingle roof; and arched dormers.

The side elevations have large windows with twenty-over-fifteen-light double-hung wood sashes. On the northeast elevation, a front-gable projecting pavilion extends from the center of the building. It has a double-leaf entrance located several steps above grade. The entry contains three-panel doors and is framed by a wooden architrave and wood pilasters supporting an entablature and swan's neck pediment. The gable above has a denticulated cornice with cornice returns and is pierced with a nine-light oculus. Below the entryway there is an arched opening in the base of the deck leading to a basement-level entrance. On the southwest elevation there is a two-bay, flat-roof section at the center of the building with twelve-over-nine-light double-hung wood sash windows, a wood cornice, and a terra cotta parapet cap. A two-story connecting corridor extends from the center

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of this section. To the southeast of the connector is a two-story, flat-roof section extending to the rear of the building. The rear elevation has a portico like the front, but the arches are filled with brick. The center archway contains a large, double-leaf entry with wood doors, and the outer arches have eight-over-eight-light windows with typical sills, jack arches, and keystones. There is a basement-level entrance below the rear central doorway as on the northeast elevation. Connecting corridors (Resources B, circa 1930s–1940s; and C, circa 1960s–2000s) link the recreation building (Resource 4, 1931) to the main building (Resource 1, 1931), the intermediate care building (Resource 2, 1931), the kitchen/dining hall/boiler plant (Resource 3, 1931), and the nursing home care unit (Resource 61, 1975).

Resource 5. Nurses' Quarters. 1931. Contributing building.

Resource 5, the former nurses' quarters (1931), is located in the residential group of buildings to the northeast of the central core group of buildings. Currently the nurses' quarters (Resource 5, 1931) contains offices used for travel and tenant space. The nurses' quarters (Resource 5, 1931) is a fifteen-bay, hip-roof building with a three-bay central projecting pavilion. The building rises two stories and is supported by a raised basement. The symmetrical facade has simple Colonial Revival materials and detailing including: five-course common bond brickwork; brick banding on the basement level; brick quoins at the corners; brick jack arches, terra cotta sills, and windows with six-over-six-light or nine-over-nine-light double-hung replacement sashes; a terra cotta water table; a raised brick stringcourse at the level of the second story window sills; and a brick soldier course below a simple wood cornice. The main entry is located in the center of the projecting pavilion along the northwest elevation. The single-leaf, paneled door is flanked with three-light sidelights and crowned with a fanlight. The entry is sheltered by a porch with wood Tuscan columns and pilasters supporting an entablature topped with a simple wood balustrade. The window above the porch is situated in a brick archway with a terra cotta keystone. Above the archway, a circular vent pierces the gable.

The side elevations of the building are three bays deep with central double-leaf doors topped with large transoms. Each side elevation is spanned by a flat-roof porch in the same style as the front entry porch. The rear of the building is similar to the front but has no central pavillion. Instead there is a central, below-grade, basement level entry. The wood door surround consists of flanking Tuscan columns and an entablature. The entrance is covered with a flat-roof metal awning. A flat-roof, two-story addition with an entrance and elevator shaft has been added to the northeast side of the rear elevation.

Resource 6. Duplex Quarters. 1931. Contributing building.

The duplex quarters (Resource 6, 1931) is located east-northeast of the nurses' quarters (Resource 5, 1931) in the residential group of buildings. Currently the duplex quarters (Resource 6, 1931) serves as the Veterans Integrated Service Network (VISN) offices. The duplex quarters (Resource 6, 1931) is a two-and-one-half-story, six-bay (w/d/w/w/d/w), gambrel-roof duplex composed of two symmetrical units with central front entrances. The building exhibits typical Colonial Revival materials and detailing, including five-course common bond brickwork; a brick soldier course between the raised basement and first story; terra cotta sills and brick jack arches adorning windows with six-over-six-light sashes, the majority of which are replacement sashes; leaded fanlights and decorative wood door surrounds with flanking engaged Tuscan columns and open denticulated pediments; a modillion cornice; a slate shingle roof; parapeted gables; gable-roof dormers with segmental arched window bays and applied urn decoration; paired interior, gable-end chimneys connected by

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a parapet; and one-story side porches composed of Tuscan columns supporting an entablature with dentils and topped with a wood balustrade.

The side elevations each have double-leaf entrances with paired ten-light doors sheltered by the porches, two second-story windows, and a central upper story window. The rear elevation exhibits a symmetrical fenestration pattern with each unit being four bays in width, including a nine-light doorway covered by a small hip-roof awning supported by brackets. Adjacent to each rear entry is a single-story, hip-roof projection. There are single-light, basement-level windows on both the front and rear elevations.

Resource 7. Duplex Quarters. 1931. Contributing building.

This duplex quarters (Resource 7, 1931) is located east of the previous duplex quarters (Resource 6, 1931) in the residential group of buildings. Currently the building serves as the Psychological Residential Rehabilitation Treatment Program (PRRTP) transitional home. Oriented to the north, the duplex quarters (Resource 7, 1931) is a two-story, six-bay (w/d/w/w/d/w), gambrel-roof duplex that very closely resembles the previous duplex quarters (Resource 6, 1931). The only significant difference between the two is that the side porches of Resource 7 have been screened in and surrounded by a metal awning.

Resource 8. Director's Quarters. 1931. Contributing building.

The director's quarters (Resource 8, 1931) is located west of the duplex quarters (Resource 6, 1931) in the residential group of buildings. Oriented to the north, the director's quarters (Resource 8, 1931) is a two-story, three-bay, side-gable, single family residence exhibiting typical Colonial Revival materials and detailing, including symmetrical fenestration; five-course common bond brickwork; a soldier course between the raised basement and first story; terra cotta sills and brick jack arches adorning windows with six-over-six-light or eight-over-eight-light double-hung wood sashes; a central entry topped with a five-light transom and a decorative door surround with fluted pilasters and a broken pediment; a modillion cornice; a slate shingle roof; and an exterior gable-end chimney.

The west elevation has a single-bay, one-story, flat-roof wing with a wood balustrade. The wing has a side entrance with a brick porch and metal awning to the right and a possible exterior basement entry. The west elevation of the main block has two second-story windows and two small attic-level windows in the gable end. The east elevation is spanned by a one-story glassed-in porch with wood balustrade. The east elevation of the main block exhibits similar second- and attic-level fenestration as the west elevation. The west portion of the rear elevation has a two-story, flat-roof projection. There is a triple window in the first story of the projection and two bricked-in window bays above. The rear elevation has a central entry. Basement windows are visible along the facade, west, and rear elevations.

Resource 9. Radial Brick Chimney. 1931. Contributing structure.

The radial brick chimney (Resource 9, 1931) is located at the southeast end of the kitchen, dining hall, and boiler plant building (Resource 3, 1931) in the central core group of buildings. A number of facilities no longer retain chimney stacks as the structures have been removed. The radial brick chimney (Resource 9, 1931) is surrounded by regularly-spaced metal bands. A metal door at the base reads: "Alphons Custodis Chimney Const. Co. Bennett Blg New York."

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Resource 12. Warehouse. 1931. Contributing building.

Resource 12, the warehouse (1931), is located in the south-central portion of the historic district within the maintenance/utility group of buildings. The warehouse (Resource 12, 1931), oriented to the northwest, is a long, rectangular, one-story, gable-roof building. The warehouse (Resource 12, 1931) is supported by a poured concrete foundation, is clad in five-course common bond brick, and has decorative exposed rafter tails. The roof, sheathed in slate shingles, has three ridgeline vents. A concrete loading dock, most of which has been enclosed in metal sheeting, spans the northwest elevation. The southwest portion of the facade, beyond the metal-enclosed section, has two six-over-six-light awning windows flanking a pedestrian entry with a metal door. There are three similar awning windows and one smaller window along the southwest gable end, and three bricked-in windows along the northeast gable end.

An addition connected to the southeast elevation of the warehouse (Resource 12, 1931) was constructed in the 1970s or 1980s. The addition is slightly separated from the southeast elevation of the original block of the building and appears to be connected by two narrow corridors. The addition is a large, metal-clad warehouse building with a shallow gable roof. There are two pedestrian metal doors on the southeast elevation and a loading dock on the northeast elevation. The addition is supported by a poured concrete foundation. Even though the addition has a large footprint and its materials are not sympathetic to the original block of the warehouse (Resource 12, 1931), it is only connected by narrow corridors to the main block. Three elevations of the main block remain clearly visible and only the rear elevation is obstructed from view by the addition. The warehouse (Resource 12, 1931) retains sufficient integrity to contribute to the historic district.

Resource 14. Gas Meter House. 1931. Contributing building.

The gas meter house (Resource 14, 1931) is located in the northwestern corner of the historic district near Loop Road. It is a small, single-story, one-bay, front-gable building laid in five-course common bond brick. The gas meter house (Resource 14, 1931) has a wooden cornice and the roof is sheathed in slate shingles. The northwest elevation has a single-leaf entrance while the remaining three elevations have square windows with terra cotta sills.

Resource 15. Duplex Quarters. 1933. Contributing building.

This duplex quarters (Resource 15, 1933) is located to the east of another duplex quarters (Resource 7, 1931) in the residential grouping of the historic district. Currently this building serves as a transitional home. The duplex quarters (Resource 15, 1933) is a two-story, six-bay (w/d/w/w/d/w), gambrel-roof duplex that very closely resembles Resources 6 and 7, except that the rear elevation of this duplex quarters (Resource 15, 1933) has a fully exposed walkout basement. A single car garage is located under each side porch, and the overall rear fenestration pattern varies from the previous two duplex quarters (Resources 6 and 7, both 1931). Rather than two smaller projections, this duplex quarters (Resource 15, 1933) has a central, four-bay, two-story projection along the rear of the building. Each unit has two windows in the first story of the projection and a narrow window and paired windows in the second story. The majority of windows throughout the duplex have six-over-six-light double-hung wood sashes. To either side of the projection is a single-leaf entry with a nine-light door sheltered by a small, bracketed, hip-roof awning.

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Resource 17. Engineering Shops. 1933. Contributing building.

The engineering shops building (Resource 17, 1933) is located in the cluster of maintenance/utility buildings to the northeast of the warehouse (Resource 12, 1931). The engineering shops building (Resource 17, 1933), oriented to the northwest, is a one-story, ten-bay (ww/ddd/ww/ddd/ww/d/w/w/d/dd), side-gable building with exposed rafter tails. The engineering shops building (Resource 17, 1933) has an exterior of brick in a five-course common bond, the roof is sheathed in slate shingles, and three ventilators pierce the roof's ridgeline. The engineering shops building (Resource 17, 1933) has six-over-six-light metal awning windows and twelve-light doors with multi-light transoms above. A flat-roof metal awning supported by metal posts spans the facade. The southwest gable end has three bays with paired windows. There is a one-story, shed-roof, metal-clad addition along the southwest portion of the rear elevation, and a larger, metal-clad, shed-roof addition spanning the remainder of the rear elevation. The southwest elevation of the larger addition is open and serves as storage. A connecting corridor (Resource B, circa 1930s–1940s) extends along the northeast gable end of the building. The metal additions, although large, do not detract from the typical characteristics that identify the engineering shops building (Resource 17, 1933) as belonging to the maintenance/utilities group of a Second Generation Veterans Hospital.

Resource 18. Laundry. 1933. Contributing building.

The laundry (Resource 18, 1933) is located in the cluster of maintenance/utility buildings, directly southwest of the warehouse (Resource 12, 1931). The laundry (Resource 18, 1933) is a one-story, eight-bay (dd/ww/ww/d/ww/ww/d/d), side-gable building with a three-bay (ddd/ww/w), flat-roof extension on the southwest elevation. The laundry (Resource 18, 1933) is clad in five-course common bond and covered with a slate shingle roof with four ridgeline ventilators. It has six-over-six-light metal awning windows on the side-gable portion and larger metal awning windows along the flat roof portion of the building. The pedestrian doors all have multiple lights and multi-light transoms, and there is a loading dock entry with a metal overhead door filling the fourth bay. The southwest and northeast elevations have below-grade, basement-level entries. Metal awnings shelter many of the window openings. The rear elevation of the side-gable main block has a flat-roof addition with a large loading dock clad in metal to the rear of the building.

Resource 20. Flag pole. 1933. Contributing object.

The flag pole (Resource 20, 1933) is located in front of the main building (Resource 1, 1931) in a patch of grass surrounded by a driveway and parking spaces. The octagon-shaped, monumental base of the flag pole (Resource 20, 1933) is similar in size and construction to those at other Period II Second Generation Veterans Hospitals. The base is constructed of poured concrete. A short concrete sidewalk extends from the driveway in front of the main building (Resource 1, 1931) to the flag pole (Resource 20, 1933).

Resource 25. Four-bay Garage. 1932. Contributing building.

This four-bay garage (Resource 25, 1932) is located in the residential grouping of the historic district, to the rear of the duplex quarters (Resources 6 and 7, both 1931). Oriented to the north, the four-bay garage (Resource 25, 1932) is a one-story, four-bay, shed-roof garage with four metal replacement overhead doors. The facade is clad in brick in a stretcher bond, and the sides and rear are covered in pargeting and are painted white. The roof is covered with metal panels. There are four window openings filled with vents across the rear, and a small shed-roof addition with a pedestrian door extending from the back of the third bay.

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Resource 27. Sixteen-bay Garage. 1932. Contributing building.

The sixteen-bay garage (Resource 27, 1932) is located within the residential grouping of buildings to the rear of the nurses' quarters (Resource 5, 1931). Oriented to the northwest, the building (Resource 27, 1932) is a single-story, sixteen-bay, shed-roof garage with modern metal overhead doors. The garage is built into a slope and is divided into three stepped levels. The lower two sections are five bays wide and the upper section is six bays wide. Like the four-bay garage (Resource 25, 1932), the facade is clad in brick and the sides and rear are clad in pargeting and are painted white. The rear elevation has sixteen window openings filled with vents.

Resource 28. One-Bay Garage. 1936. Contributing building.

This single-bay garage (Resource 28, 1936) is located within the residential group, to the rear of the director's quarters (Resource 8, 1931). Oriented to the north, Resource 28 is a single-story, one-bay, shed-roof garage with a modern metal overhead door. The facade is clad in brick and the remaining elevations are covered in pargeting and painted white. There is a single window opening filled with a vent along the rear elevation. Currently the building is used for storage.

Resource 33. Psychiatric Ward/Treatment Building. 1939. Contributing building.

This psychiatric ward/treatment building (Resource 33, 1939) is located within the southeastern portion of the historic district within the patient care group of buildings. It is oriented to the northeast across a courtyard facing two H-shaped psychiatric care buildings (Resources 39 and 40, both 1944). Currently this building is used by the Veterans Integrated Services Network (VISN) 7 Emergency Medical Response Team/Acquisition and Material Management Service (EMRT/A&MM). The psychiatric ward/ treatment building (Resource 33, 1939) is a one-story, thirty-five bay, hip-roof, elongated H-shaped building with five front-gable projections across the facade: a three-bay central entry pavilion, two three-bay return wings, and single-bay end porches. These projections are repeated on the rear elevation with a central wing in place of the entry pavilion. The building is clad in brick in a five-course common bond and has an asphalt shingle roof. It exhibits typical Colonial Revival and Classical Revival details, including a terra cotta water table between the basement and first story; a terra cotta cornice encompassing the building and cornice returns of the gables; circular attic vents in the majority of the gables; brick quoins adorning the corners and brick banding on the southeast and northwest porches; terra cotta sills at all window openings; a terra cotta door surround with pilasters and a broken pediment at the main entry; brick jack arches and stylized terra cotta keystones above the windows of the central pavillion; and a four-sided vented cupola at the center of the roof's ridgeline. All of the windows have replacement one-over-one-light double-hung metal frame sashes, and the entrances all have commercial metal frame doors. On the rear elevation there is a loading dock next to the southeast wing, and a flat roof addition next to the southeast gable end covers one of the original bays. This psychiatric ward/treatment building (Resource 33, 1939) connects to another psychiatric ward/treatment building (Resource 39, 1944) by way of a corridor (Resource B, circa 1930s–1940s) that extends from its northwest end. This corridor also connects into the corridor system (Resource B, circa 1930s–1940s) connecting Resources 1–4 (main building, intermediate care building, kitchen/dining hall/boiler plant, recreation building, all 1931).

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Resource 38. Psychiatric Ward/Treatment Building. 1944. Contributing building.

This psychiatric ward/treatment building (Resource 38, 1944), oriented to the northeast, is located adjacent to the central cluster of buildings, to the southeast of the main building (Resource 1, 1931). Currently this building is used for primary care. The psychiatric ward/treatment building (Resource 38, 1944) is a three-story, multi-bay, hip-roof building supported by a basement with hip-roof return wings and gable-roof wing extensions creating an overall H-shape. Newer construction to the northeast (education and training building [Resource 63, 1976] and the ambulatory care building [135, 1987]) and southwest (outside the historic district, the four-story psychiatric care building [1995]) of this psychiatric ward/treatment building (Resource 38, 1944) has created nearly-enclosed courtyard areas. The adjacent newer construction and vegetation in the courtyards created difficulties in viewing the original principal elevations of this H-shaped building in their entirety from a single position. The H-building, constructed to accommodate patients and facilitate their treatment, is a common building typology found at Period II neuropsychiatric Second Generation Veterans Hospitals.

This psychiatric ward/treatment building (Resource 38, 1944) appears to have originally resembled Resources 39 and 40 (both 1944), and the descriptions for these buildings provide a more clear explanation of the typical H-shaped building and standard Colonial Revival and Classical Revival details. This psychiatric ward/treatment building (Resource 38, 1944) differs from two other psychiatric ward/treatment buildings within the historic district (Resources 39 and 40, both 1944) in a few notable ways. Constructed on a slope, this psychiatric ward/treatment building (Resource 38, 1944) is three-stories with a full walk-out basement along the rear (southwest) elevation, whereas Resources 39 and 40 are two-story buildings supported by raised basements. The first floor and basement of this psychiatric ward/treatment building (Resource 38, 1944) are clad with brick banding as seen on other major buildings within the historic district. Another difference is the fenestration pattern along this psychiatric ward/treatment building's (Resource 38, 1944) main block and return wings, as the windows are composed in paired sets rather than single windows. The windows throughout the building have replacement sashes simulating six-over-six-light sashes. Porches set within brick arches along the second and third stories of the southwest elevations of the return wings have been enclosed with brick and metal frame glass windows. Later modifications to this psychiatric ward/treatment building (Resource 38, 1944) have further differentiated it, including a gable-roof addition to the facade's double-projecting pavilion. The facade of this addition incorporates three arched window bays inspired by the porches along the rear elevation while an entry is located along the northwest elevation of the addition. The roofs of the main block and rear central wing have been raised apparently to accommodate HVAC systems. The main public entrances to this psychiatric ward/treatment building (Resource 38, 1944) are below a raised connecting corridor extending to the four-story psychiatric care building (1995) located outside the historic district and in the southeast gable-roof wing extension.

Although this psychiatric ward/treatment building (Resource 38, 1944) has numerous modifications, including the raised roofline, replacement windows, the encroachment of later buildings, and the addition to the projecting pavilion of the former entrance, the resource retains sufficient integrity to contribute to the historic district. The psychiatric ward/treatment building (Resource 38, 1944) continues to exhibit the historic characteristics of location, design, materials, workmanship, and association of similar H-buildings at the Tuscaloosa VA Hospital Historic District and other Period II neuropsychiatric Second Generation Veterans Hospitals through its scale, massing, Colonial Revival style decorative elements (brick exteriors, quions, brick banding, lunette filled pediments, terra cotta cornice, window sills, and stringcourse), the overall H-shape of the building, and the porches (although enclosed) of the return wings.

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Resource 39. Psychiatric Ward/Treatment Building. 1944. Contributing building.

This psychiatric ward/treatment building (Resource 39, 1944) is located within the southeastern portion of the historic district. Oriented to the southwest across a courtyard to another psychiatric ward/treatment building (Resource 33, 1939), this psychiatric ward/treatment building (Resource 39, 1944) is a two-story, nineteen-bay, gable-roof, H-shaped building with hip-roof return wings that is supported by a raised basement. The facade has a double-projecting, hip-roof central pavilion with a three-bay, pedimented projection. The building is clad in four-course common bond and the roof is sheathed in slate shingles. The psychiatric ward/treatment building (Resource 39, 1944) exhibits typical Colonial Revival details, including a terra cotta water table between the basement and first floor; a terra cotta cornice encompassing the building; lunette windows in the pediments of the gables; brick quoins adorning the corners; terra cotta sills at all window openings; and a terra cotta door surround with pilasters and a segmental curved pediment at the main entry. All of the windows have replacement one-over-one-light or four-over-four-light metal frame sashes. The facade entrance has a commercial metal frame replacement door.

The rear elevation has a fully exposed walkout basement and four single-leaf entrances at the basement level, most with metal frame glass commercial doors. Its overall fenestration is similar to the front, but the rear central projecting pavilion is three bays wide. The rear (northeast) elevation of the return wings each terminate in two-story, hip-roof porches defined by three large brick arches across the rear elevation and two arches on each side elevation. The arches all have terra cotta keystones. The porches remain open to the air and are enclosed with wire screen. Connecting corridors (Resource B, circa 1930s–1940s) link three of the historic district's psychiatric ward/treatment buildings (Resources 33, 1939; 39, and 40, both 1944).

Resource 40. Psychiatric Ward/Treatment Building. 1944. Contributing building.

This psychiatric ward/treatment building (Resource 40, 1944) is located in the southeastern portion of the historic district. Currently this building is used for child care. Oriented to the southwest, the building is situated across a quadrangle from another psychiatric ward/treatment building (Resource 33, 1939) and southeast of a third psychiatric ward/treatment building (Resource 39, 1944). This psychiatric ward/treatment building (Resource 40, 1944) is a two-story, nineteen-bay, gable-roof, H-shaped building resting on a raised basement. In its overall massing, fenestration, and detailing, it is quite similar to Resource 39, with the principal differences between the two buildings occurring along the rear elevation. Resource 40 has a three-bay, projecting central facade pavilion rather than the double projecting pavilion of Resource 39. Also, the porches of the return wings have been enclosed with brick and double-hung replacement sashes. There are no windows in the central bay of the porches. This psychiatric ward/treatment building (Resource 40, 1944) connects to Resource 39 (1944) by way of a corridor (Resource B, circa 1930s–1940s) extending from its northwestern elevation.

Resource 41. Shops and Garage Building. 1944. Contributing building.

The shops and garage building (Resource 41, 1944) is located within the southern portion of the historic district in the maintenance/utility group of buildings. The shops and garage building (Resource 41, 1944) is a one-story, eleven bay (w/w/d/w/w/d/w/w/d/w/w), side-gable building with a five-bay, front-gable, central projection along the facade. This projection has a centered, single-leaf entry with a replacement metal frame door and single-light transom. The building is clad in brick in a four-course common bond. The roof is sheathed in slate shingles and is pierced with four roofline ventilators. The shops and garage building (Resource 41,

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1944) has six, twelve, and fifteen-light metal awning windows and commercial metal frame glass doors. Most of the windows are shaded by metal awnings. The rear elevation has a fully exposed walkout basement nine bays in width with overhead garage doors into the basement and paired windows across the first floor. The side elevations each have three basement-level and three first-story windows.

Resource 42. Water Tank and Tower. Circa 1980s–1990s. *Noncontributing structure.*

Resource 42 (circa 1980s–1990s) is a modern water tank and tower located in the maintenance/utility group of buildings. The walls of the cylindrical tower are covered in corrugated metal, and the upper cylindrical tank is smooth and painted with the words "Roll Tide Tuscaloosa Water Works." There is an overhead garage door on the south side of the tower. A small, prefabricated, gable-roof, metal-clad building is situated adjacent to the tower. The massing of this water tank and tower (Resource 42, circa 1980s–1990s) is much larger than the original water tower that is no longer extant.

Resource 46. Chapel. 1963. *Noncontributing building.*

The chapel (Resource 46, 1963) is located to the northwest of the courtyard near the psychiatric ward/treatment buildings (Resources 33, 1939; and 39, 1944). The chapel (Resource 46, 1963) is a one-story, single-bay, front-gable building clad in brick in a stretcher bond. The facade has a narrow, front gable projection with a large multi-light window above the recessed double-leaf entry with commercial metal frame doors. A simple metal steeple extends from the point where the projection meets the main mass of the building. The northeast elevation has three bays. A single-leaf entrance with a large two-light transom and large vertical two-over-two-light windows are found along each side elevation. A single-story, flat-roof section spans the rear of the building and the rear half of the southwest elevation.

Resource 61. Nursing Home Care Unit. 1975. *Noncontributing building.*

The nursing home care unit (Resource 61, 1975) is located north/northwest of the residential group and northeast of the central core group of buildings. Oriented to the northeast, the nursing home care unit (Resource 61, 1975) is a large, asymmetrical, one-story, hip-roof building with hip-roof projecting wings. The area between the facade return wings forms a courtyard with the main entrance, consisting of automatic horizontal sliding doors, along the southeast portion of the main mass. The building is clad in brick in a stretcher bond and has embellishments including panels below the windows, a band above the windows, and a simple cornice, all possibly constructed of terra cotta. The windows all have sashes mimicking twelve-over-twelve-light sashes. Although the materials of the nursing home care unit (Resource 61, 1975) resemble those of the historic district's original buildings, it does not exhibit their Colonial Revival and Classical Revival massing, scale, or detailing. A noncontributing connecting corridor (Resource C, circa 1960s–2000s) links the nursing home care unit (Resource 61, 1975) to the recreation building (Resource 4, 1931).

Resource 62. Auxiliary Power Unit Building. Circa 1970s. *Noncontributing building.*

Resource 62 is located by the southeast corner of the kitchen/dining hall/boiler plant (Resource 3, 1931). The auxiliary power unit building (Resource 62, circa 1970s) is a one-story, metal-clad, shallow gable-roof building with double metal doors along the southeast gable end and vents along the northwest and northeast elevations.

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Resource 63 and 135. Education and Training Building and Ambulatory Care Building Addition. 1976 and 1987. Noncontributing building.

The education and training building (Resource 63, 1976) is attached to the southeast elevation of the ambulatory care building addition (Resource 135, 1987), directly northwest of the intermediate care building (Resource 2, 1931) within the central core group of buildings. The education and training building (Resource 63, 1976), oriented to the southeast, is a two-story, nine-bay, hip-roof building supported by a concrete foundation. The hip-roof may only be along the edge of the roof while the center may be a flat roof. The building is clad in brick in a stretcher bond and the roof is sheathed in asphalt shingles. The windows are accented with brick jack arches and contain eight-over-eight-light double-hung metal sashes. The main entrance, centered along the southeast elevation, has a metal awning spanning the courtyard to the facade entrance of the intermediate care building (Resource 2, 1931). The northeast elevation has three single-leaf entries with metal doors with second-story windows above and the southwest elevation has five windows and a single-leaf entry with windows along the upper story.

The ambulatory care building (Resource 135, 1987) is located to the west/southwest of the main building (Resource 1, 1931) and is an addition to the education and training building (Resource 63, 1976). The facade is oriented to the northwest and clearly dates to the later portion of the twentieth century. The ambulatory care building (Resource 135, 1987) is a multiple-story, side-gable building with tiered flat-roof projections on the facade. The tallest of these flat-roof sections and the main entrance are enhanced with central pedimented projections with large semicircular vents. A pyramidal-roof canopy extends from the main entry. The first two stories of the building are clad in banded brick, and the upper portion is laid in four-course common bond. Every roofline is trimmed with a simple concrete cornice or parapet cap, the windows have concrete jack arches, and the central bays of the facade, including the pedimented section at the front entrance and the canopy, are differentiated with concrete banding.

The northeast elevation has a drive-up window for the pharmacy and a below grade single-leaf entry. The southwest elevation has a basement loading dock and numerous window openings along the first and second floors. Half of the rear elevation is adjacent to the education and training building (Resource 63, 1976), while the exposed portion has tiered flat-roof projections with regularly spaced six-light windows.

Resource 138. Chiller Building. 1995. Noncontributing building.

The chiller building (Resource 138, 1995) oriented to the northeast, is located in the south portion of the historic district in the maintenance/utility group of buildings. Constructed on a slope, the chiller building (Resource 138, 1995) is a long, rectangular, one-story, nine-bay, flat-roof building clad in brick in a stretcher bond. A stringcourse, possibly of concrete, encircles the building above the doorways and the parapet walls are topped with a concrete cap. The facade is spanned by four vehicular entries with metal overhead garage doors, two vents, and three pedestrian entries with metal doors. The other elevations have no openings and large chiller equipment is located outside the building by the southeast elevation.

Resource 140. Generator Building. Circa 1990s. Noncontributing building.

The generator building (Resource 140, circa 1990s), oriented to the northwest, is located near the southern boundary of the historic district in the maintenance/utility group of buildings. The generator building (Resource 140, circa 1990s) is a one-story, rectangular, hip-roof building clad in brick laid in a stretcher bond and trimmed

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with a wood cornice. There are double metal doors with a concrete lintel along the facade and vents along all other elevations. There is also a pedestrian entry along its southwest elevation.

Resource 142. Storage Building. 1988. Noncontributing building.

The storage building (Resource 142, 1988), oriented to the northeast, is located in the maintenance/utility group of buildings. The storage building (Resource 142, 1988) is a one-story, four-bay, side-gable building clad in brick laid in a four-course common bond with metal panels cladding the roof. The facade has alternating overhead garage doors and pedestrian doors that are sheltered by a flat-roof metal porch with metal posts. There is a single pedestrian door on the rear elevation, and rectangular attic-level vents in the gables.

Resource A. Small Brick Building. Circa 1930s. Noncontributing building.

This small brick building (Resource A, circa 1930s) is located to the northeast of the addition to the warehouse (Resource 12, 1931) within the maintenance/utility group of buildings. It is a rectangular, one-story, flat-roof building clad in brick laid in a nine-course common bond and topped with a poured concrete parapet cap. The building (Resource A, circa 1930s) has a double-leaf entry with replacement metal doors along the northeast elevation and three replacement windows on the southeast elevation. The double-leaf entry appears to have been resized or added to the building. The three window openings on the northwest elevation have been filled with brick. On a 1943 site plan map updated to 1977, this resource appears to be indicated as Resource 28, the flammable storage building.⁴ Resource 28 is currently the single-bay garage (1936) to the south of the director's quarters (Resource 8, 1931). Because of the enclosing of the window openings, added or resized double-leaf entry, and replacement doors and windows, this small building no longer retains integrity of materials, design, and workmanship and is not a contributing resource to the historic district.

Resource B. Connecting Corridors. Circa 1930s–1950. Contributing structure.

There are two types of connecting corridors found within the Tuscaloosa VA Hospital Historic District that appear to date to different periods. The first two groups of connecting corridors appear to have been constructed during the period of significance. The first group connects the main building, intermediate care building, kitchen/dining hall/boiler plant, recreation building (Resources 1–4, all 1931) and the psychiatric ward/treatment building (Resource 38, 1944). These are two-story, gable-roof corridors with windows evenly spaced along their length. The first stories are clad in brick banding and the second stories are clad in five course common bond with pilasters composed brick banding separating the bays. Brick jack arches and terra cotta sills define the window openings, which contain replacement one-over-one-light double-hung sashes.

The second group of corridors connects three H-shaped psychiatric care buildings (Resources 33, 1939; 39, 1944; and 40, 1944), and ties into the corridor system for the main building, intermediate care building, kitchen/dining hall/boiler plant, and recreation building (Resources 1–4, all 1931). These corridors are one-story with flat roofs topped with terra cotta parapet caps. They are clad in brick in a five-course common bond and exhibit windows along their sides of the corridors facing away from the central quadrangle. Windows are defined by terra

⁴ United States Department of Veterans Affairs, files of the Historic Preservation Office, Office of Construction and Facilities Management, Washington, D.C.

United States Department of the Interior
National Park Service

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cotta sills and contain one-over-one-light double-hung replacement sashes. Viewed from the courtyard, the corridors appear as solid brick walls.

Resource C. Connecting Corridor. Circa 1970s. Noncontributing structure.

A flat-roof enclosed corridor connects the recreation building (Resource 4, 1931) to the nursing home care unit (Resource 61, 1975). This connecting corridor (Resource C, circa 1970s) appears to have been constructed in the 1970s with the erection of the nursing home care unit (Resource 61, 1975). This corridor has brick piers and is filled with metal panels below single-light windows.

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)

- Politics/Government _____
- Health/Medicine _____
- Architecture _____
- _____
- _____

Period of Significance

1931-1950

Significant Dates

- 1939 _____
- 1940 _____
- 1944 _____

Significant Person

(Complete only if Criterion B is marked above)

NA _____

Cultural Affiliation

NA _____

Architect/Builder

Construction Service, Veterans Administration

Period of Significance (justification)

The period of significance begins with the construction of the hospital buildings on the site in 1931 and extends through 1950; the termination date for the period of significance as stated in the United States Second Generation Veterans Hospital Multiple Property Documentation form. The contributing resources all date to the period of significance of the historic district. These resources relate to the historic district's basic identity as a Period II general medical and surgical hospital sub-type and later as a neuropsychiatric hospital sub-type within the Second Generation Veterans Hospital typology. Buildings constructed after 1950 no longer relate to the design philosophies developed by the Second Generation Veterans Hospitals.

Criteria Considerations (explanation, if necessary)

N/A

Statement of Significance Summary Paragraph (provide a summary paragraph that includes level of significance and applicable criteria)

The Tuscaloosa VA Hospital Historic District is significant as an excellent, intact example of a Period II general medical and surgical Second Generation Veterans Hospital that was later converted to a neuropsychiatric hospital. The Tuscaloosa VA Hospital Historic District is eligible for listing in the National Register of Historic Places (NRHP) under Criterion A at the state level in the areas of Politics and Government because of the importance placed on securing the federal facility and its impact on the local community and veterans throughout the state of Alabama. The Tuscaloosa VA Hospital Historic District is also eligible under Criterion A at the state level in the areas of Health and Medicine because of the physical evidence the hospital provides concerning health care offered to veterans of the state, primarily veterans of World War I and World War II. The historic district is also eligible under Criterion C at the state level in the area of Architecture because the Tuscaloosa VA Hospital Historic District is an intact example of a Period II Second Generation Veterans Hospital incorporating elements of classical revival architectural styles that were nationally popular in the early to mid-twentieth century. The use of projecting pavilions, corner quoins, balustrades, and the former dominant cupola that towered over the main building (Resource 1, 1931) reflects the influence of the Colonial Revival and Classical Revival styles that were fashionable in the early decades of the twentieth century and continued to be popular in the years after World War II. The Tuscaloosa VA Hospital Historic District is additionally significant for its monumental building that serves as the focal point of the historic district, a widespread practice for important public and institutional buildings. The historic district also exhibits standardized building and landscape designs that were incorporated into the campuses of Period II Second Generation Veterans Hospitals. Construction began on the Tuscaloosa VA Hospital in 1931, and various additions were constructed through 1950. It was initially designated a general medical and surgical hospital serving veterans in Alabama and portions of Mississippi and Georgia. In 1940 the Tuscaloosa VA Hospital was redesignated as a neuropsychiatric hospital. The historic district continues to retain characteristics of both sub-types of Second Generation Veterans Hospitals. The use of the nationally popular architectural styles creates a cohesive design for the historic district. The use of revivalist architecture, especially on the main and recreation buildings, reflects the importance of the VA and its mission to provide medical care to the nation's veterans. Revivalist architecture, such as the Colonial Revival and Classical Revival styles, were utilized for many federal buildings constructed in the first half of the twentieth century to exhibit patriotism through the use of stylistic elements associated with the early history of the United States and to reflect the permanence of the institutions contained within the buildings. The period of significance and assessment of contributing and noncontributing resources for this nomination are based on the historic district's significance within the historic contexts developed in the United States Second Generation Veterans Hospitals Multiple Property Documentation Form (MPDF). Resources constructed after 1950, and thus considered noncontributing within this nomination, may possess significance under themes not fully developed as part of the MPDF. Resources located within the medical center campus may be eligible or contributing for other associations or contexts under National Register Criteria A–D, or recent buildings/structures may be eligible under Criteria Consideration G, for resources of exceptional importance that are less than 50 years of age.

Narrative Statement of Significance (provide at least one paragraph for each area of significance)

Areas of Significance: Criterion A

Politics and Government

The Tuscaloosa VA Hospital Historic District is eligible under Criterion A in the areas of Politics and Government at the state level because the selection of the site of the hospital was partially determined by the political influences of the local community to acquire the federal hospital and its substantial economic contributions to the local and state economy. The site for the hospital was one of sixteen possible sites located near Tuscaloosa. The local efforts to acquire the federal general medical and surgical hospital for veterans were successful, and land for the veterans hospital was selected in 1930 by the Federal Board of Hospitalization.¹ A newspaper headline stated that the selected location was a "Spot Called One of Most Beautiful Hospital Sites

See Continuation Sheet, page 8.19.

¹ "Wyman-Hagler Tract Is Picked for Hospital; U.S. Accepts C. of C. Offer; to Speed Construction," *Tuscaloosa News*, November 12, 1930.

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in Nation.”⁵ The Tuscaloosa VA Hospital Historic District was dedicated on July 6, 1932. The hospital was intended to serve veterans in Alabama and portions of Mississippi and Georgia.⁶ The construction of the hospital provided employment to laborers and skilled craftsmen. The wages and supplies purchased during the construction provided an economic stimulus to the local economy dealing with the effects of the Great Depression. Even after its opening, the hospital continued to provide employment and financial support through the wages paid and supplies purchased for the operation of the facility. The hospital’s statewide importance is illustrated by the number of dignitaries and politicians that attended the facility’s dedication, such as U. S. Senator Hugo L. Black; Alabama representative Lamar Jeffers; the VA director of construction from Washington, D.C., Colonel Louis H. Tripp; the superintendent of the Alabama Insane Hospital, Dr. W. D. Partlow; the commander of the Department of Alabama’s American Legion, James Connor; and the president of the University of Alabama, Dr. George H. Denny.⁷ The statewide level of significance for the Tuscaloosa VA Hospital Historic District is evidenced by it being a major investment in the community, and its importance was demonstrated by the turnout of thousands at the facility’s dedication in July 1932. As stated by Colonel Louis H. Tripp, director of construction of the Veterans Administration, at the dedication ceremony for the Tuscaloosa VA Hospital, the United States “has far surpassed all other nations in the care of ex-service men.”⁸ The hospital remained important to the state and local community throughout the period of significance, as the Tuscaloosa VA Hospital Historic District expanded to care for neuropsychiatric patients and continued to serve as an economic engine to the local economy.

Health/Medicine

The Tuscaloosa VA Hospital Historic District is eligible under Criterion A at the state level in the areas of Health and Medicine because of the role the Tuscaloosa VA Hospital Historic District played in the mission of the federal government through the VA to provide quality health care to the nation’s veterans, primarily those who served in World War I and World War II. Thousands of veterans, from Alabama and surrounding states received subsidized general medical, surgical, and later neuropsychiatric care during the period of significance that they may not have received if the federal government had not provided such treatment for them. A newspaper article referred to the soon to be dedicated hospital as representing “the latest in the treatment of all types of diseases and provid[ing] surgical equipment second to no hospital in the United States.”⁹ The hospital was to serve as a regional hospital for veterans, not only serving former soldiers from central Alabama, but also veterans from portions of Mississippi and Georgia.¹⁰ At the end of June 1935 the Tuscaloosa VA Hospital had a capacity of 346 beds.¹¹ By mid-1939 the capacity of the hospital increased to

⁵ “Wyman-Hagler Tract Is Picked for Hospital; U.S. Accepts C. of C. Offer; to Speed Construction,” *Tuscaloosa News*, November 12, 1930.

⁶ “10 Patients Now at US Hospital,” *Tuscaloosa News*, July 17, 1932.

⁷ Dedication Program, Veterans’ Administration Hospital, Tuscaloosa, Alabama, July 6, 1932.

⁸ “10,000 Witness Dedication of Vets Hospital,” *Tuscaloosa News*, July 7, 1932.

⁹ Martel Brett, “Dedication of Veterans Hospital at Tuscaloosa Set This Week,” *Birmingham News-Age Herald*, July 3, 1932, located in *Tuscaloosa VAMC Chronicles, Special Edition – Historic Review 1932–1999*, 6.

¹⁰ “10 Patients Now at US Hospital,” *Tuscaloosa News*, July 17, 1932.

¹¹ *Annual Report of the Administrator of Veterans Affairs for the Fiscal Year Ended June 30, 1935* (Washington, D.C.: U.S. Government Printing Office, 1935): 95.

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535 beds.¹² In November 1940 the Tuscaloosa VA Hospital Historic District was redesignated a neuropsychiatric hospital from its original purpose as a general medical and surgical hospital. The addition of three patient ward/treatment buildings in the mid-1940s, primarily to meet the needs of veterans returning from World War II, increased the bed capacity of the facility.¹³ At the end of June 1945 the capacity of the Tuscaloosa VA Hospital was 791 beds.¹⁴ The capacity of the facility on June 30, 1946 was 782 beds, with 114 beds designated for general medical and surgical patients and 668 beds for neuropsychiatric patients.¹⁵ The capacity increased to 1,020 beds by June 30, 1948, with 812 patients admitted at the time: 109 general medical and surgical patients; five tuberculosis patients; and 698 neuropsychiatric patients.¹⁶ On June 30, 1949 the total authorized beds for the Tuscaloosa VA Hospital was 1,140 beds, which included 1,010 standard beds and 130 emergency beds. The hospital had 844 occupied beds on June 30, 1949, designated as the following: 23 tuberculosis patients; 74 general medical and surgical patients; and 747 neuropsychiatric patients.¹⁷ By mid-1950 the total number of authorized beds had declined to 968 beds. On June 30, 1950 the Tuscaloosa VA Hospital had a total of 816 patients admitted, including: 20 tuberculosis patients; 67 general medical and surgical patients; and 729 neuropsychiatric patients.¹⁸ A newspaper article describing the dedication of the facility in 1932 stated the hospital "is destined to minister to the needs of disabled veterans in this area for years to come."¹⁹ These comments underscore the importance placed on the medical services the institution would provide to Alabama veterans. The Tuscaloosa VA Hospital Historic District continues to serve as a physical reminder of medical care provided by the federal government through the VA to veterans throughout the period of significance.

Areas of Significance: Criterion C

Architecture

The Tuscaloosa VA Hospital Historic District is eligible under Criterion C at the state level in the area of Architecture as an excellent example of a Period II general medical and surgical Second Generation Veterans Hospital utilizing the Colonial Revival and Classical Revival architectural styles. The hospital was later designated a veterans neuropsychiatric hospital. The Tuscaloosa VA Hospital Historic District retains buildings and landscape characteristics of both sub-types of hospitals, as buildings constructed to fulfill the needs of a

¹² *Annual Report of the Administrator of Veterans' Affairs for the Fiscal Year Ended June 30, 1939* (Washington, D.C.: U.S. Government Printing Office, 1939): 113.

¹³ Lawrence Fanning, Chairperson, Booklet Subcommittee, *50th Anniversary Veterans Administration Medical Center, Tuscaloosa, Alabama* (Tuscaloosa, AL: Veterans Administration, 1982), n.p.

¹⁴ *Annual Report of the Administrator of Veterans' Affairs for the Fiscal Year Ended June 30, 1945* (Washington, D.C.: U.S. Government Printing Office, 1946): 126.

¹⁵ *Administrator of Veterans Affairs Annual Report for Fiscal Year Ended June 30, 1946* (Washington, D.C.: U.S. Government Printing Office, 1947): 96.

¹⁶ *Administrator of Veterans Affairs Annual Report for Fiscal Year Ending June 30, 1948* (Washington, D.C.: U.S. Government Printing Office, 1949): 112.

¹⁷ *Administrator of Veterans Affairs Annual Report for Fiscal Year Ending June 30, 1949* (Washington, D.C.: U.S. Government Printing Office, 1950): 118.

¹⁸ *Administrator of Veterans Affairs Annual Report for Fiscal Year Ending June 30, 1950* (Washington, D.C.: U.S. Government Printing Office, 1951): 139.

¹⁹ "Hospital Opened for Inspection; Program at 4:30," *Tuscaloosa News*, July 6, 1932.

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neuropsychiatric hospital during the period of significance continued to exhibit elements of the Colonial Revival and Classical Revival architectural styles. The Colonial Revival and Classical Revival styles were nationally popular during the period of significance and suggests a strong national pride following World War I and continuing beyond the Second World War. This architectural style was the most prevalent of those utilized for the Second Generation Veterans Hospitals, and the Tuscaloosa VA Hospital Historic District is an excellent example of the use of the Colonial Revival and Classical Revival styles within this typology. As a sub-group of the Second Generation Veterans Hospitals, the Period II general medical and surgical hospitals have distinct characteristics that differ from those of other hospital sub-types constructed during the same period. These character defining features of the general medical and surgical hospital sub-group include a smaller campus size, usually situated near or along the edge of an urban area; denser grouping of the central core and maintenance/utility clusters that usually place the two groups into close proximity; a monumental main building; only one (if any) additional patient ward building aside from the main building; less use of natural contours and lengthy formal entrance drives in the design of the campus; and a kitchen/dining hall building that may also incorporate the boiler plant and attendants' quarters. The Tuscaloosa VA Hospital Historic District includes most of these characteristics shared with the majority of Period II general medical and surgical Second Generation Veterans Hospitals.

The Tuscaloosa VA Hospital Historic District also includes characteristics of Period II neuropsychiatric hospitals, since the facility's function was changed from that of a general medical and surgical hospital to a neuropsychiatric hospital in 1940, eight years after its dedication. Characteristics of a Period II veterans neuropsychiatric hospital embodied by the Tuscaloosa VA Hospital Historic District include a campus located on the edge of a community, a monumental main building, and a number of H-shape patient ward/treatment buildings connected by enclosed corridors and situated around a courtyard. Originally the Tuscaloosa VA Hospital Historic District had few maintenance/utility buildings, since the boiler plant functions were incorporated into the dining hall/kitchen building. Additional maintenance/utility buildings began to be constructed the year following the dedication of the Tuscaloosa VA Hospital. The Tuscaloosa VA Hospital Historic District also utilized standardized designs employed for Period II veterans hospitals. These designs evolved from earlier Second Generation Veterans Hospitals that began to be constructed in 1919. Similar, if not identical, buildings can be found at Period II veterans general medical and surgical and neuropsychiatric Second Generation Veterans Hospitals. These standardized designs include resources within the Tuscaloosa VA Hospital Historic District, such as the main building, recreational building, staff residential buildings, patient ward/treatment buildings, and characteristics in the landscape design.

Integrity

As a historic district eligible under both Criteria A and C, the Tuscaloosa VA Hospital Historic District should retain a high degree of integrity of the resources' physical characteristics, including materials, workmanship, and design, and more ephemeral characteristics related to the historic district as a whole, such as location, setting, association, and feeling. Design refers to both the individual resources and the historic district as a whole. Although the resources within the historic district do not have to be individually exceptional, the resources and the historic district as a whole have to continue to reflect the spatial patterns and associations of the historic district dating to the period of significance. To retain integrity under Criterion A, the individual resources must retain those character-defining features that are necessary to convey their role in the

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mission of the federal government, through the VA, to provide general medical and surgical care, and later neuropsychiatric medical care, to veterans throughout the state. These features are often found in the overall form, massing, and scale of the buildings and their relationship to one another within the historic district. To retain integrity under Criterion C, the individual resources must retain those character-defining features identified with the design of the specific building type and hospital sub-type as defined in the Second Generation Veterans Hospitals Multiple Property Documentation Form (MPDF). This includes those features required under Criterion A, as well as noteworthy stylistic details and historical materials.

The Tuscaloosa VA Hospital Historic District continues to serve as a medical facility and retains much of its original appearance dating to the period of significance during which the contributing resources were constructed. Contributing buildings retain most of their character defining details, especially those exhibiting Classical Revival and Colonial Revival architectural elements. The hospital and associated campus within the historic district are situated at the original location, although the historic district is much smaller in total acreage than at its creation because surplus land has been transferred to other ownership. Few buildings/structures dating to the period of significance within the historic district appear to have been lost. Resources that existed during the period of significance but have been lost subsequently within the historic district include the original water tower (replaced by Resource 42, circa 1980s–1990s), a greenhouse, and the gatehouse. The pump house is still extant but appears to no longer be located within hospital property and is situated outside the boundary of the historic district. Other buildings located beyond the historic district also appear to no longer remain, including four single quarters, their associated garages, and various temporary buildings. Although the historic district has lost some of its buildings and structures dating from the period of significance, no major contributing buildings, such as patient treatment, administrative, recreational, and maintenance/utility, have been demolished. The historic district continues to reflect the mission of the hospital during the period of significance to provide general medical and surgical care, and later neuropsychiatric care, to veterans and retains the majority of buildings associated with this mission. Additions and buildings have been constructed after the period of significance that impact the integrity of certain resources and the overall historic district. The majority of resources erected during the period of significance and the historic district retain integrity of location, setting, design, materials, workmanship, association, and feeling.

The landscapes of Second Generation Veterans Hospitals appear to have evolved from the earliest hospitals dating to 1919 through 1950. The Second Generation Veterans Hospitals constructed during Period II, especially neuropsychiatric hospitals, attempted to utilize the natural attributes of the site in the placement of the buildings and development of curvilinear drives and sidewalks for visitors and patients, although the constraints of the sites, such as topography and acreage, could limit the use of naturalistic design qualities within the campus. The Tuscaloosa VA Hospital Historic District landscape, because of its initial construction as a Period II general medical and surgical hospital and later designation as a neuropsychiatric hospital, exhibits attributes of both sub-types of Second Generation Veterans Hospitals. The initial central core buildings constructed within the historic district were arranged in a somewhat dense arrangement, with the residential quarters distanced from the central core buildings. Few maintenance/utility buildings were constructed, since the dining hall/kitchen building (Resource 3, 1931) also included the boiler plant. The main entrance drive leading to the main building (Resource 1, 1931) begins as a linear drive before curving to the southwest to the front of the main building (Resource 1, 1931). This formal entrance drive, although short in comparison to many Period II facilities originally constructed as neuropsychiatric hospitals, is also longer and more of a processional entry than is found at many Period II general medical and surgical hospitals. This entrance drive, with mature trees flanking

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it near Loop Road, retains integrity of setting and design. Because of its original designation as a general medical and surgical hospital, sidewalks throughout the facility serve their primary function of leading pedestrians from one building to another along the shortest possible route. Enclosed corridors were constructed to connect the original central core buildings. Another characteristic common to Second Generation Veterans Hospitals is the distancing of the residential quarters group from the central core group of buildings. This same configuration is found at the Tuscaloosa VA Hospital Historic District, although as with most original general medical and surgical hospitals, the residences are in closer proximity to the central core than those found at many Period II neuropsychiatric hospitals. Beginning in 1944, the addition of patient ward/treatment buildings to serve the facility's new designation as a neuropsychiatric hospital allowed incorporation of additional curvilinear drives and sidewalks around the newly completed buildings within the historic district. The most notable of these new landscape features include the courtyard created with the construction of three psychiatric ward/treatment buildings (Resources 33, 1939; 39 and 40, both 1944) and the elliptical drive encompassing these three resources. Enclosed corridors were constructed to connect the original core group to these patient treatment/ward buildings. The size and number of parking lots increased over time along with the newly introduced buildings. The largest parking lot introduced within the historic district after the period of significance is located northwest of the central core group of buildings in the large lawn in front of Resource 1, the main building (1931). Another, smaller parking lot is located in the southeast portion of the historic district, south-southeast of two of the patient ward/treatment buildings (Resources 33, 1939; and 40, 1944). Although parking lots increase the amount of paved surface within the historic district, the parking lots continue to provide the open spatial configuration associated with the campus design during the period of significance. The front lawn is the largest open area within the historic district. Mature trees and lawns also encompass the residential quarters in the eastern portion of the historic district. The integrity of the historic district's landscape has been impacted by the introduction of later buildings, structures, and parking lots. But these impacts have been mitigated through the design of the buildings, their placement within the historic district, and even the parking lots, which provide open areas in keeping with the spatial design associated with the period of significance. The landscape of the Tuscaloosa VA Hospital Historic District retains integrity of design and setting.

Changes to historic district buildings include replacement windows, enclosed or partially enclosed windows for smaller openings, replacement doors, enclosed porches, and additions. Replacement windows are found on buildings dating to the period of significance throughout the historic district. The replacement windows found on the buildings of the central core and residential groups have double-hung sashes with single-over-single-light or various multiple light sashes. The replacement windows of Resource 38, the patient ward/treatment building (1944), are single sash with divided lights that mimic the original double-hung sashes. Original wood, divided-light sashes are also found filling windows of various buildings in the historic district. The replacement window sashes diminish a building's integrity of design and materials because in certain instances they do not reflect the original double-hung, divided light sashes originally utilized for the buildings. Enclosing and partially enclosing window openings to accommodate smaller windows and the use of replacement doors also diminish integrity of design and materials for various buildings within the historic district. Enclosing the porches of the director's quarters (Resource 8, 1931) and the patient ward/treatment buildings (Resources 33, 1939; 38, 1944; and 40, 1944) impacts the design, materials, and workmanship of these resources. The former locations of the open porches continue to be visibly recognizable and the resources retain character defining architectural elements as well as overall massing and scale. Although the

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replacement windows, doors, enclosed/partially enclosed windows, and enclosed porches all diminish the characteristics of design, materials, and workmanship, they do not significantly diminish these characteristics of the buildings, and the resources continue to contribute to the significance of the historic district. One of the most visible modifications to the historic district is the removal of the cupola from the main building (Resource 1, 1931). The cupola assisted in making the main building the focal point of the historic district through capping the top of this monumental building. The cupola was removed after the period of significance, and in other examples of Second Generation Veterans Hospitals the cupola has been removed, usually because of water or lightning damage. The removal of the cupola diminishes the materials and workmanship of the building, but its monumental size and placement on an elevated position within the historic district allows the building to continue to serve as the historic district's focal point. Therefore, although the building's integrity is diminished, it continues to be a contributing resource to the historic district. Resource 38, the psychiatric ward/treatment building (1944) located southwest of the main building (Resource 1, 1931), is a large resource constructed during the period of significance that has a number of exterior modifications. The southwest elevation of the building, which would have been its rear elevation, is oriented to the psychiatric care building (1995), located outside the historic district boundary, and they are connected by a raised, enclosed corridor. The historic district boundary extends through the northeast end of the raised corridor, near the southeast elevation of the central rear wing of the psychiatric ward/treatment building (Resource 38, 1944). The central block and the rear central wing of Resource 38 (psychiatric ward/treatment building, 1944) have raised roofs to accommodate modern ventilation machinery. No changes have been made to the return wings or central projections along the sides. A central projection has also been added to the facade elevation. The terra cotta cornice and original rooflines remain visible, and the raised roof appears to approximate the slope and form of the original, with vents visible along the raised roof portion. The massing of the side elevations remains unchanged, and the alterations to the rooflines are not visible from the side elevations. The center addition to the facade is sympathetic in design and materials to the original portion of the building. Even with the modifications to the building and its diminished qualities of materials and workmanship, Resource 38 continues to retain sufficient integrity to express its original H-shape and function related to providing housing and treatment of neuropsychiatric patients. Although these individual changes do not substantially diminish the integrity of the historic district, these modifications can cumulatively impact the integrity of the resources and the historic district as a whole. Even with these cumulative modifications, the resources continue to contribute to the historic district. The interiors of the majority of buildings within the historic district, although not fully investigated, appear to have lost integrity because of alterations made over time to adapt them to changing standards in medical care.

The integrity of the historic district's setting and design has been impacted by the introduction of buildings—especially buildings with large footprints or massing—structures, and parking lots after the period of significance. Many of the buildings/structures added to the Tuscaloosa VA Hospital Historic District are small and do not interrupt the original spatial qualities of design or setting, such as generator buildings (Resource 62, circa 1970s; and Resource 140, circa 1990s) and the chapel (Resource 46, 1963). Resources added to the historic district within the maintenance/utility group after the period of significance include the chiller building (Resource 138, 1995), storage building (Resource 142, 1988), and the replacement water tower (Resource 42, circa 1980s–1990s). These buildings are obscured from view throughout most of the historic district, except for the water tower, because of their placement to the rear of the historic district. The replacement water tower (Resource 42, circa 1980s–1990s) is a visual intrusion because it is much larger in massing than the original

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water tower and appears to be the tallest structure within the historic district. The water tower, with its "Roll Tide" and "Tuscaloosa Water Works" painted on the tank, is clearly visible from Loop Road extending along the front (northwest) of the historic district, even though it is located to the rear of the main building (Resource 1, 1931). The water tower is also visible from within most of the historic district. Resource 61 (1975), the nursing home care unit, is located northeast of the central core group. Although this resource has a large footprint, it is a single-story building that does not diminish the overall design and setting of the historic district because it is situated at a slightly lower elevation than the central core group and does not redirect the focus from the original center of the facility. The facade of Resource 135, the ambulatory care building (1987), extends beyond the facade wall plane of the main building (Resource 1, 1931) and along with Resource 63, the education and training building (1976), interrupts the spatial design of the historic district between the main building (Resource 1, 1931) and Resource 38 (psychiatric ward/treatment building, 1944). Although the two connected buildings interrupt the original spatial pattern, and the ambulatory care building has a larger footprint than the main building, they are both subordinate in height to the main building. The facade of the ambulatory care building (Resource 135, 1987) is constructed in receding steps from the facade wall plane, and its materials and design (brick banding along the exterior and a gable roof) are sympathetic to the designs of the buildings constructed during the period of significance. Resources 12, 17, and 3 (the warehouse [1931], engineering shops building [1933], and the dining hall/kitchen/boiler plant building [1931], respectively) are resources within the historic district constructed during the period of significance that have a number of exterior modifications. The warehouse (Resource 12, 1931) has a large metal addition to the rear (southeast) elevation, diminishing the qualities of workmanship and materials. This addition is separated from the wall plane of the warehouse and appears to be connected by two narrow corridors. The separation of the addition from the original block allows the warehouse to retain its integrity of design, workmanship, and materials and to convey its significance as a contributing maintenance/utility building within the historic district. Resource 17, the engineering shops building (1933), has two shed-roof metal additions along its rear elevation. The northeast gable end is obscured by an enclosed corridor dating to the period of significance. Although these two additions are large, they are both subordinate to the original massing of Resource 17, and the facade, southwest gable end, and roofline sheathed in slate shingles allow the engineering shops building to retain sufficient integrity to convey its significance as a contributing resource to the historic district. The addition to the dining hall/kitchen/boiler plant building (Resource 3, 1931) is located along its southwest elevation and extends toward Resource 2 (1931), the intermediate care building. The addition has a flat roof similar to other portions of the building, and the exterior is clad in common bond brick with jack arches over the windows similar to the original block of the building. Although the addition is large, it remains subordinate to the original portion of the building, and its footprint remains smaller than the original block of the kitchen/dining hall/boiler plant building (Resource 3, 1931). Therefore, the dining hall/kitchen/boiler plant (Resource 3) continues to retain sufficient integrity to express its original function related to providing meals and generating steam heat to the facility. None of the additions or buildings/structures introduced to the historic district after the period of significance redirect the attention from the monumental main building (Resource 1, 1931), which continues to serve as the focal point of the historic district. The noncontributing resources do not substantially interrupt the original spatial design or setting of the historic district.

Although the cumulative effect of modifications, such as the loss of some buildings, the construction of buildings and additions, and the loss of the main building's cupola (Resource 1, 1931) after the period of significance diminishes the integrity of design and setting, the historic district continues to reflect the mission of

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the hospital during the period of significance to provide general medical and surgical care and later neuropsychiatric care to veterans. The evolution of the buildings and setting does not reach the point to render the historic district not eligible for listing in the National Register of Historic Places. The historic district retains the majority of resources erected during the period of significance, and the historic district retains integrity of location, setting, design, materials, workmanship, association, and feeling to convey its significance. The Tuscaloosa VA Hospital Historic District continues to communicate its sense of time and place as a hospital constructed during the period of significance and its connection to other veterans hospitals of this typology.

Historical Narrative

The site chosen for the VA hospital in Tuscaloosa, Alabama, contained approximately 404 acres, and a headline in the local newspaper claimed the location was "Called One of Most Beautiful Hospital Sites in Nation."²⁰ The acreage for the new hospital was referred to as the Hagler-Wyman tract; these were just the two largest single properties, but a number of smaller land owners were also included in the total acreage. Sixteen sites within the county had been reviewed prior to the VA settling on the Hagler-Wyman tract in November 1930.²¹

The dedication of the hospital took place on July 6, 1932. A newspaper account providing a preview of the dedication ceremony stated the hospital plant consisted of four buildings and connecting corridors, including the administration building, auditorium, patient ward building, and the kitchen/dining/boiler plant. These are probably Resources 1 through 4 (1931), although eleven buildings were under construction within the campus in 1931, including the residential quarters.²² Resting on a raised basement, the four-story administration (main) building (Resource 1) was constructed in the nationally popular Colonial Revival and Classical Revival styles, having decorative elements such as a projecting central pavilion exhibiting pilasters with composite order capitals supporting an entablature, a pediment with decorative dentil molding and swags, symmetrical facade fenestration, brick exterior, and a cupola. The cupola was removed prior to 1976. The other newly constructed buildings also exhibited Colonial Revival style decorative elements but to a lesser degree than the administration (main) building (Resource 1). The premises were open to the public in the afternoon until the dedication ceremonies began at 4:30 PM. One newspaper account stated hundreds were on hand to inspect the buildings before the official dedication program began. Included in the program were Colonel Louis H. Tripp, director of construction of the VA; Dr. George Denny, president of the University of Alabama; and U.S. Senator Hugo L. Black, representing the state of Alabama.²³ Colonel Tripp addressed a crowd purportedly numbering 10,000 at the dedication, reminding those present of the VA's responsibilities to those that have served in the nation's military forces. Alabama provided more than 84,000 members to the military services during World War I, with nearly 2,000 killed and 3,200 wounded in action. Colonel Tripp commented that the

²⁰ "Wyman-Hagler Tract Is Picked for Hospital; U.S. Accepts C. of C. Offer; to Speed Construction," *Tuscaloosa News*, November 12, 1930.

²¹ *Ibid.*

²² "Vets Hospital Dedication to Attract Many," *Tuscaloosa News*, July 3, 1932; Lawrence Fanning, Chairperson, Booklet Subcommittee, *50th Anniversary Veterans Administration Medical Center, Tuscaloosa, Alabama* (Tuscaloosa, AL: Veterans Administration, 1982), n.p.

²³ Dedication Program, Veterans' Administration Hospital, Tuscaloosa, Alabama, July 6, 1932; "Hospital Opened for Inspection; Program at 4:30," *Tuscaloosa News*, July 6, 1932.

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VA was operating fifty-seven hospitals and ten soldier's homes while providing remittances to approximately 950,000 veterans and 580,000 dependants of veterans.

As the dedication of the Tuscaloosa VA Hospital for general medical and surgical patients was taking place, requests for additional funding for the facility were made to Frank T. Hines, administrator of the VA. The newly dedicated hospital, with a capacity of 273 beds, was deemed to be of insufficient size to accommodate the medical needs of area veterans.²⁴ A resolution requesting \$247,000 in funding for increased capacity was needed because of "the crying need for additional beds and facilities with which to handle economically and promptly the large number of veterans now requiring and entitled to hospitalization."²⁵

The first patient arrived at the hospital on July 15, 1932, the first day of operations for the facility. Approximately 250 patients were expected to arrive at the hospital within a month of opening. The service area of the Tuscaloosa VA Hospital included Alabama and portions of Mississippi and Georgia.²⁶ During fiscal year 1934, an additional 73 beds were added to the facility's capacity²⁷ "through new construction, alterations, or readjustment of space."²⁸ The new bed capacity of the hospital was 346 beds.

The addition of a neuropsychiatric patient ward/treatment building (Resource 33) in 1939, with a bed capacity of 189 beds, increased the total facility's capacity to 535 beds. Resource 33 added to the hospital's general medical and surgical treatment options provided at the time.²⁹ The Tuscaloosa VA Hospital was categorized as a neuropsychiatric hospital on November 1, 1940. Alterations conducted during the modification from general medical and surgical to a neuropsychiatric hospital included the addition of 23 beds during fiscal year 1942, increasing the capacity of the facility to 558 beds. Forty-nine beds were reserved for general medical and surgical purposes and twenty-two beds were set aside for men with tuberculosis suffering from neuropsychiatric disorders.³⁰ An additional twenty-nine beds were designated for women with "mild neuropsychiatric conditions."³¹ Fifty-four "over-capacity" beds were added to the hospital in 1945, raising the capacity at the Tuscaloosa hospital to 791 beds.³²

Three H-shape buildings for housing and treating neuropsychiatric patients were constructed in the mid-1940s. The three buildings, Resources 38, 39, and 40 (all 1944), incorporated Colonial Revival decorative

²⁴ "Request Made for Release of Hospital Funds," *Tuscaloosa News*, July 7, 1932; Fanning, n.p.; *Annual Report of the Administrator of Veterans' Affairs for the Fiscal Year Ended June 30, 1933* (Washington, D.C.: U.S. Government Printing Office, 1933): 13.

²⁵ "Request Made for Release of Hospital Funds," *Tuscaloosa News*, July 7, 1932.

²⁶ "10 Patients Now at US Hospital," *Tuscaloosa News*, July 17, 1932.

²⁷ *Annual Report of the Administrator of Veterans' Affairs for the Fiscal Year Ended June 30, 1934*, (Washington, D.C.: U.S. Government Printing Office, 1935): 91.

²⁸ *Ibid*, 16.

²⁹ *Annual Report of the Administrator of Veterans' Affairs for the Fiscal Year Ended June 30, 1939*, (Washington, D.C.: U.S. Government Printing Office, 1939): 11, 113; Fanning, n.p.

³⁰ Fanning, n.p.; *Annual Report of the Administrator of Veterans' Affairs for the Fiscal Year Ended June 30, 1941*, (Washington, D.C.: U.S. Government Printing Office, 1942): 109; "Tuscaloosa, Ala., Facility Is Modern Hospital," *National Tribune* (Washington, D.C.), July 2, 1942, located in the vertical files of the Tuscaloosa Veterans Affairs Medical Center Library, Tuscaloosa, Alabama.

³¹ "Tuscaloosa, Ala., Facility Is Modern Hospital," *National Tribune*, July 2, 1942, located in the vertical files of the Tuscaloosa Veterans Affairs Medical Center Library, Tuscaloosa, Alabama.

³² Fanning, n.p.; *Annual Report of the Administrator of Veterans' Affairs for the Fiscal Year Ended June 30, 1945* (Washington, D.C.: U.S. Government Printing Office, 1946): 126.

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elements, but to a lesser degree than the administration/main building (Resource 1, 1931). The last three buildings relied mainly on massing, scale, materials, symmetry, central projecting pavilions, stringcourses, and quoins to convey the decorative features of the Colonial Revival style. These three patient ward/treatment buildings were constructed in the H-shape common to Period II neuropsychiatric veterans hospitals. Two of the last three H-shape buildings had a capacity of 164 patients, while the third building's capacity was 170. With the addition of Resources 38, 39, and 40, the facility could handle a total of 1,140 patients, the historic high capacity for the facility.³³

No large additions were made to the fiscal plant of the facility over the next fifteen years. A chapel was constructed in 1963 and by 1970 the Tuscaloosa VA Hospital had a staff numbering 688 and a total of 833 beds.³⁴ A nursing home care facility was constructed during 1975/1976 (Resource 61). The nursing home care facility, with a capacity of 120 beds and construction cost of \$2.5 million, was dedicated on April 2, 1976 with the Administrator of Veterans Affairs, Richard L. Roudebush, as the principle speaker.³⁵ The Veterans Administration Central Office designed the nursing home facility and Goodner Construction Company served as the general contractor.³⁶ An education building (Resource 63) with a library was constructed during 1976/1977.³⁷

The VA hospitals were renamed medical centers in 1978 to highlight the various capabilities of each facility. The Tuscaloosa VA Hospital had a bed capacity in 1982 of 491 for psychiatric patients, an alcohol rehabilitation unit with 44 beds, 58 general medical beds, and 120 beds in the nursing home facility. The hospital, with nearly 900 employees, was associated with three medical schools in 1982 while serving veterans in portions of Alabama and Mississippi.³⁸ Modifications to the facility during the early 1980s included the construction of connecting corridors to the chapel (Resource 46, 1963) and replacement of windows throughout the campus.³⁹

A new building serving psychiatric patients was opened in 1995 with a bed capacity of 270. In January 2000, the Tuscaloosa Veterans Affairs Medical Center had a capacity of 702 beds, including those of the

³³ Fanning, n.p.; *Administrator of Veterans Affairs Annual Report for Fiscal Year Ending June 30, 1949* (Washington, D.C.: U.S. Government Printing Office, 1950): 118.

³⁴ Fanning, n.p.; "40th Anniversary," *Tuscaloosa News*, July 24, 1970, located in the vertical files of the Tuscaloosa Veterans Affairs Medical Center Library, Tuscaloosa, Alabama.

³⁵ Fanning, n.p.; "New Nursing Home Dedication Friday," *Tuscaloosa News*, March 31, 1976, located in the vertical files of the Tuscaloosa Veterans Affairs Medical Center Library, Tuscaloosa, Alabama.

³⁶ Dedication Ceremony Program, Nursing Home Care Unit, Veterans Administration Hospital, Tuscaloosa, Alabama, April 2, 1976, located in the vertical files of the Tuscaloosa Veterans Affairs Medical Center Library, Tuscaloosa, Alabama.

³⁷ "Growth Forecast in Next Decade," *Tuscaloosa News*, May 28, 1980, located in the vertical files of the Tuscaloosa Veterans Affairs Medical Center Library, Tuscaloosa, Alabama.

³⁸ Fanning, n.p.

³⁹ Rhonda Wooldridge, "\$14 million VA Renovation Planned," *Tuscaloosa News*, July 28, 1982, located in the vertical files of the Tuscaloosa Veterans Affairs Medical Center Library, Tuscaloosa, Alabama; "Growth Forecast in Next Decade," *Tuscaloosa News*, May 28, 1980, located in the vertical files of the Tuscaloosa Veterans Affairs Medical Center Library, Tuscaloosa, Alabama.

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nursing home (Resource 61).⁴⁰ The hospital, designated a neuropsychiatric, general medical, and long-term care facility, currently serves veterans in Alabama, Georgia, and South Carolina.⁴¹

The acreage utilized by the VA at the Tuscaloosa medical center has decreased in size over the past eight decades. From its original 404 acres (or 414 acres, depending on the source), the facility currently owns approximately 120 acres. Land formerly owned by the VA has been transferred to a number of entities for various purposes, including "a residential subdivision, the University of Alabama Golf Course and Arboretum, Station number 6 of the Tuscaloosa Fire Department, the State of Alabama for right-of-way, the East Tuscaloosa Community Center, and The University of Alabama's Brewer-Porch Children's Center."⁴²

Statewide level of significance for Tuscaloosa, Alabama, VA Hospital Historic District:

The Tuscaloosa VA Hospital Historic District is significant at the statewide level as an example of an early 1930s, Period II, Second Generation Veterans Hospital exhibiting Classical Revival and Colonial Revival decorative ornamentation. While the Tuskegee VA Hospital represents an example of an early 1920s (Period I) neuropsychiatric Second Generation Veterans Hospital with later, Period II buildings that illustrate the evolution of veterans' neuropsychiatric hospital building design, the Tuscaloosa VA Hospital Historic District is the only example in Alabama of a fully developed, early Period II general medical and surgical hospital that was later converted to a neuropsychiatric Second Generation Veterans Hospital. The main building (Resource 1, 1931), with its projecting pavilion, hip-roof, terra cotta decorative elements, brick quoins, and former cupola, is nearly identical to main buildings of VA hospitals constructed during the early 1930s at Lexington, Kentucky; Lincoln, Nebraska; Newington, Connecticut; Lyons, New Jersey; and Coatesville, Pennsylvania. Buildings similar or nearly identical in design to the recreation building, staff quarters, and patient ward buildings at Tuscaloosa may be found at the above hospitals and at other Period II Second Generation Veterans Hospitals throughout the nation. The Tuscaloosa VA Hospital Historic District is an excellent representation of a fully realized, Period II Second Generation Veterans Hospital dating to the early 1930s.

⁴⁰ *Tuscaloosa VAMC Chronicles, Special Edition – Historic Review 1932–1999* (Tuscaloosa, AL: Office of Public Affairs, Department of Veterans Affairs Medical Center, Tuscaloosa, Alabama, January 2000), 2, located in the Tuscaloosa Veterans Affairs Medical Center Library, Tuscaloosa, Alabama.

⁴¹ *Ibid.*, 5, 11.

⁴² *Tuscaloosa VAMC Chronicles, Special Edition – Historic Review 1932–1999* (Tuscaloosa, AL: Office of Public Affairs, Department of Veterans Affairs Medical Center, Tuscaloosa, Alabama, January 2000), 2, 4, located in the Tuscaloosa Veterans Affairs Medical Center Library, Tuscaloosa, Alabama; United States Department of Veterans Affairs, files of the Engineering Service, Tuscaloosa Veterans Affairs Medical Center, Tuscaloosa, Alabama; "Wyman-Hagler Tract Is Picked For Hospital; U.S. Accepts C. of C. Offer; to Speed Construction," *Tuscaloosa News*, November 12, 1930.

Developmental history/additional historic context information (if appropriate)

See Continuation Sheet, page 8.26.

9. Major Bibliographical References

Bibliography (Cite the books, articles, and other sources used in preparing this form on one or more continuation sheets)

See Continuation Sheet, page 9.30

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 Buildings Survey # _____

Primary location of additional data:

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

Dept of Veterans Affairs Historic Preservation Office & medical library at the Tuscaloosa

recorded by Historic American Engineering Record # _____

Name of repository: Veterans Affairs Medical Center

Historic Resources Survey Number (if assigned): NA

10. Geographical Data

Acreage of Property Approximately 60 acres
(Do not include previously listed resource acreage)

UTM References

(Place additional UTM references on a continuation sheet)

1	<u>16</u>	<u>454373</u>	<u>3672414</u>	3	<u>16</u>	<u>454774</u>	<u>3672374</u>
	Zone	Easting	Northing		Zone	Easting	Northing
2	<u>16</u>	<u>454549</u>	<u>3672626</u>	4	<u>16</u>	<u>454979</u>	<u>3672382</u>
	Zone	Easting	Northing		Zone	Easting	Northing

Verbal Boundary Description (describe the boundaries of the property)

The boundary is indicated by a polygon on the enclosed sketch map on page 36. The UTM reference points, stated in NAD 27, are provided above and on Continuation Sheet 10.33, as well as on the USGS topographic quadrangle map. The boundary begins at a point approximately 120 feet northeast of the intersection of Hegler Lane and Loop Road at UTM E 454373, N 3672414, then follows along the southeast right-of-way of Loop Road to the northeast approximately 1,070 feet to UTM E 454549, N 3672626, then trends southeast approximately 1,140 feet along a new treeline to the southwest of the McAbee Activity Center and through a parking lot located northeast of the nursing home care unit building (Resource 61) to the north edge of the drive extending to the east in front of the residential quarters at UTM E 454774, N 3672374, then trends east approximately 725 feet along the north edge of this drive to a circular loop at UTM E 454979, N 3672382, then curves to the southeast-east along the circular loop approximately 80 feet to UTM E 454988, N 3672354, then continues to the south along the east edge of the drive and through the lawn for approximately 200 feet to UTM E 454997, N 3672289. The boundary continues to the west along a vegetation line to the south of the residential quarters for approximately 690 feet to UTM E 454765, N 3672290, then continues to the southeast along the northeast edge of a drive to the northeast of Resources 39 and 40 for approximately 690 feet to the southeast corner of a parking lot at UTM E 454918, N 3672073, then continues to the southwest along the southeast edge of the parking lot to the southern property line for approximately 630 feet to UTM E 454769, N 3671981. The historic district boundary then continues to the west-northwest along the southern property line for approximately 620 feet to UTM E 454542, N 3672006. The historic district boundary then continues to the northwest approximately 750 feet, extending between Resource 38 and the multi-story psychiatric care building (constructed in 1995), near the southwest elevation of Resource 38, to UTM E 454410, N 3672183, then continuing to the northwest for approximately 950 feet to the beginning, encompassing approximately 60 acres.

Boundary Justification (explain why the boundaries were selected)

The boundary of the Tuscaloosa VA Hospital Historic District is delineated to include to the greatest extent possible the contributing resources while encompassing the fewest noncontributing resources possible. The boundary includes the original main building, patient ward/treatment buildings, staff residential quarters, maintenance/utility buildings, the formal entrance drive, and the open vista extending from the original main building to the public entrance along Loop Road. The boundary follows the edge of existing drives within the historic district where possible, while excluding large noncontributing resources. To the northeast and east, the boundary was developed to exclude buildings constructed after the period of significance, such as the Hospice of West Alabama building, greenhouse, generator building, and dietetic facility, as well as open lawns and parking lots. To the south the boundary excludes a baseball field and associated structures that appear to date to after the period of significance and also follows the current property boundary of the medical center. To the southwest of the historic district boundary are buildings and a large parking lot constructed after the period of significance, including the substantial, multi-story psychiatric care building erected in 1995. In the extreme northwest, at the southeast corner of the intersection of Loop Road and Woodland Road (aka Hagler Lane), is the Tuscaloosa Fire Station No. 6. The fire station does not appear to be associated with the medical center, other than occupying its property, and the historic district boundary excludes this structure. The northwest historic district boundary follows the southeast edge of Loop Road and includes the open vista in front of the main building (Resource 1). The NRHP historic district boundary is smaller than the current property boundary as provided by the medical center's Engineering Department.

11. Form Prepared By

name/title Trent Spurlock/Architectural Historian & Elizabeth Heavrin/Architectural Historian
organization Cultural Resource Analysts, Inc. date December 15, 2011
street & number 151 Walton Avenue telephone 859-252-4737
city or town Lexington state KY zip code 40508
e-mail _____

Additional Documentation

Submit the following items with the completed form:

- **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. Key all photographs to this map.
- **Continuation Sheets 34-38**
- **Additional items:** (Check with the SHPO or FPO for any additional items)

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- Dedication Ceremony Program, Nursing Home Care Unit, Veterans Administration Hospital, Tuscaloosa, Alabama. April 2, 1976. Located in the vertical files of the Tuscaloosa Veterans Affairs Medical Center Library.
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Tuscaloosa News. "40th Anniversary." July 24, 1970. Located in the vertical files of the Tuscaloosa Veterans Affairs Medical Center Library.

Tuscaloosa News. "10,000 Witness Dedication of Vets Hospital." July 7, 1932.

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Tuscaloosa News. "Request Made for Release of Hospital Funds." July 7, 1932.

Tuscaloosa News. "Vets Hospital Dedication to Attract Many." July 3, 1932.

Tuscaloosa News. "Wyman-Hagler Tract Is Picked for Hospital; U.S. Accepts C. of C. Offer; to Speed Construction." November 12, 1930.

Tuscaloosa VAMC Chronicles, Special Edition – Historic Review 1932–1999. Tuscaloosa, AL: Office of Public Affairs, United States Department of Veterans Affairs Medical Center, Tuscaloosa, Alabama, January 2000. Located in the Tuscaloosa Veterans Affairs Medical Center Library.

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United States Department of the Interior
National Park Service

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UTM References (Continued)

5	<u>16</u> Zone	<u>454988</u> Easting	<u>3672354</u> Northing	9	<u>16</u> Zone	<u>454769</u> Easting	<u>3671981</u> Northing
6	<u>16</u> Zone	<u>454997</u> Easting	<u>3672289</u> Northing	10	<u>16</u> Zone	<u>454542</u> Easting	<u>3672006</u> Northing
7	<u>16</u> Zone	<u>454765</u> Easting	<u>3672290</u> Northing	11	<u>16</u> Zone	<u>454410</u> Easting	<u>3672183</u> Northing
8	<u>16</u> Zone	<u>454918</u> Easting	<u>3672073</u> Northing		<u> </u> Zone	<u> </u> Easting	<u> </u> Northing

Tuscaloosa Veterans Administration Hospital Historic District
Name of Property

Tuscaloosa County, Alabama
County and State

Photographs:

Submit clear and descriptive black and white photographs. The size of each image must be 1600x1200 pixels at 300 ppi (pixels per inch) or larger. Key all photographs to the sketch map.

See Continuation Sheet Photographs 39.

Name of Property: Tuscaloosa Veterans Administration Hospital

City or Vicinity: Tuscaloosa

County: Tuscaloosa County

State: Alabama

Photographer: Kathryne M. Joseph and Trent Spurlock (same for all photos)

Date Photographed: November 10 and 11, 2008 (same for all photos)

Description of Photograph(s) and number:

Paperwork Reduction Act Statement: This information is being collected for applications to the National Register of Historic Places to nominate properties for listing or determine eligibility for listing, to list properties, and to amend existing listings. Response to this request is required to obtain a benefit in accordance with the National Historic Preservation Act, as amended (16 U.S.C.460 et seq.).

Estimated Burden Statement: Public reporting burden for this form is estimated to average 18 hours per response including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding this burden estimate or any aspect of this form to the Chief, Administrative Services Division, National Park Service, PO Box 37127, Washington, DC 20013-7127; and the Office of Management and Budget, Paperwork Reductions Project (1024-0018), Washington, DC 20503.

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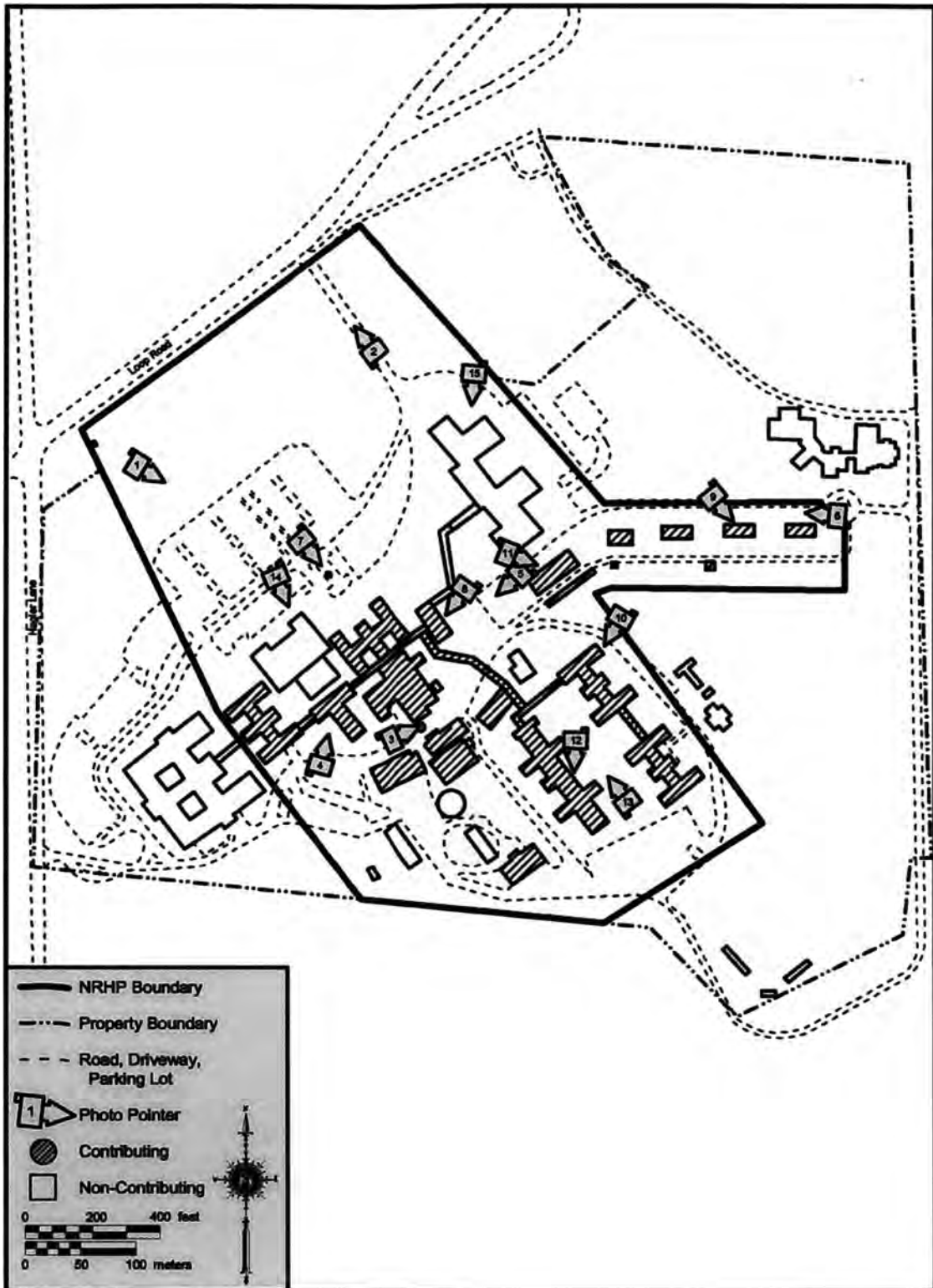
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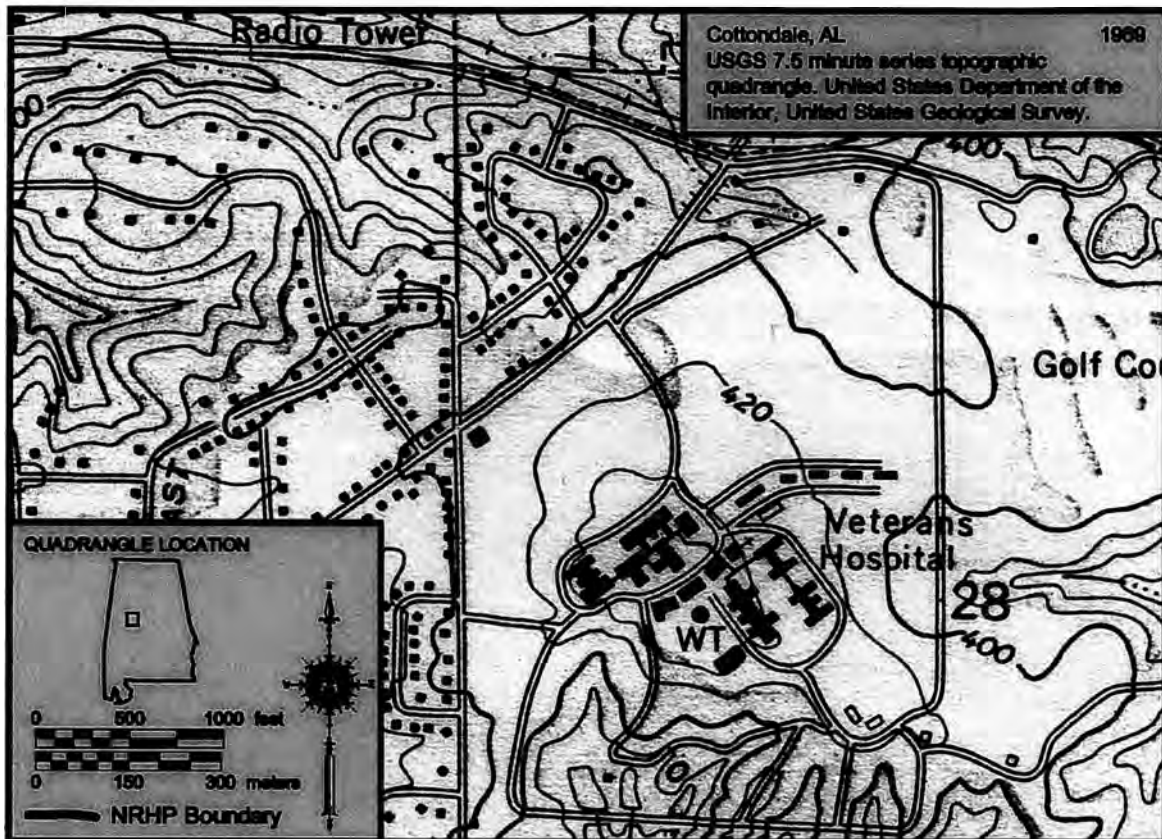
Photograph Continuation Sheet

Name of Property: Tuscaloosa Veterans' Administration Hospital (same for all photos)
City, County, State: Tuscaloosa, Tuscaloosa County, Alabama (same for all photos)
Photographer: Kathryn M. Joseph and Trent Spurlock (same for all photos)
Photo date: November 10 and 11, 2008 (same for all photos)
Original Negative: N/A (submitted compact disc, same for all photos)

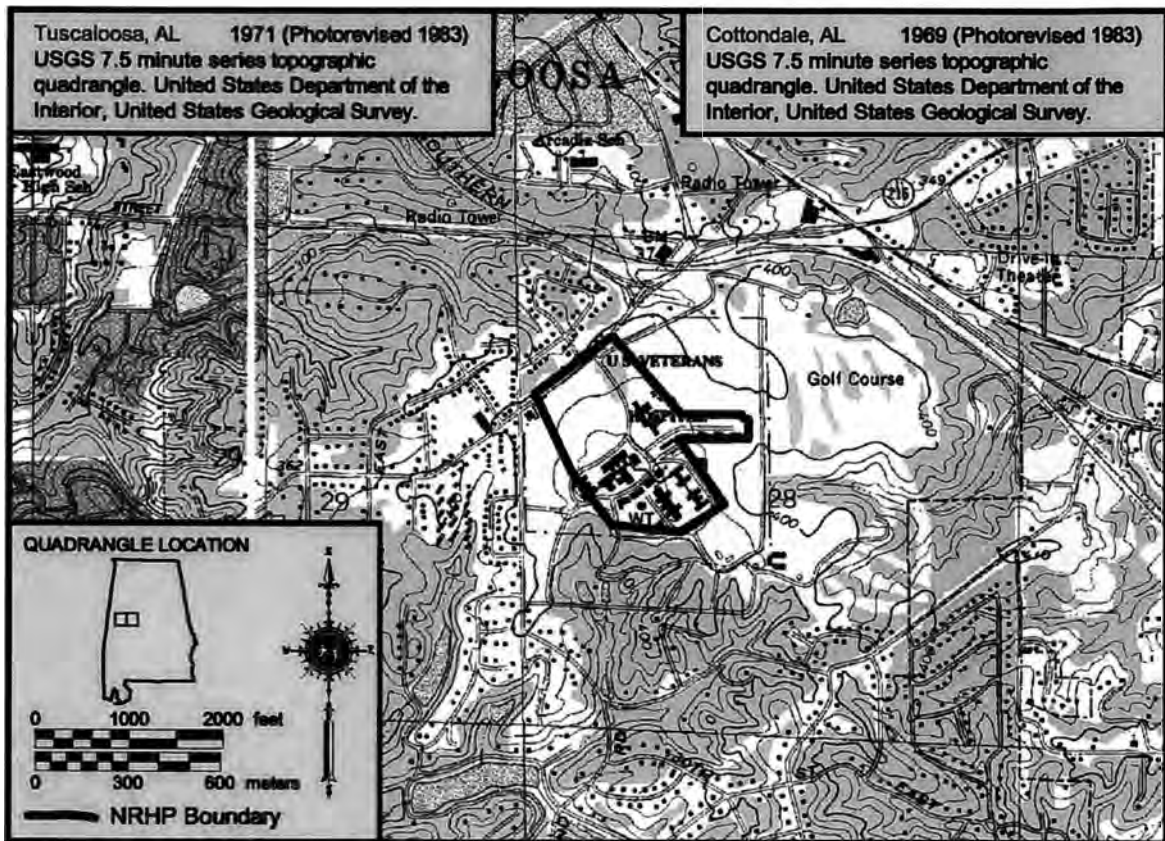
1. View looking southeast to Resources 20, 1, 42, and 135 from near Loop Road.
2. View looking northwest along main entrance drive to main entrance at Loop Road.
3. View looking northeast to Resources 3, 9, 17, 12, and 18.
4. View looking north-northeast to rear and southwest elevations of Resource 2.
5. View looking southwest to Resource 4 from between Resources 5 and 61.
6. View looking west with Resources 15, 7, and 6.
7. Facade of Resource 1. View looking to southeast.
8. Northeast elevation of Resource 4. View looking to the south/southwest.
9. Facade and west elevations of Resource 7. View looking to southeast.
10. Northeast and northwest elevations of Resource 39. View looking to south/southwest.
11. Facade and southwest elevations of Resource 5. View looking to southeast.
12. Facade (northeast) elevation of Resource 33. View looking to the south/southwest.
13. View to the northwest of courtyard and Resources 33, B, 39, and 40.
14. View to the south to facade (northwest) and northeast elevations of Resource 135.
15. Facade (northeast) and northwest elevations of Resource 61. View to the south.



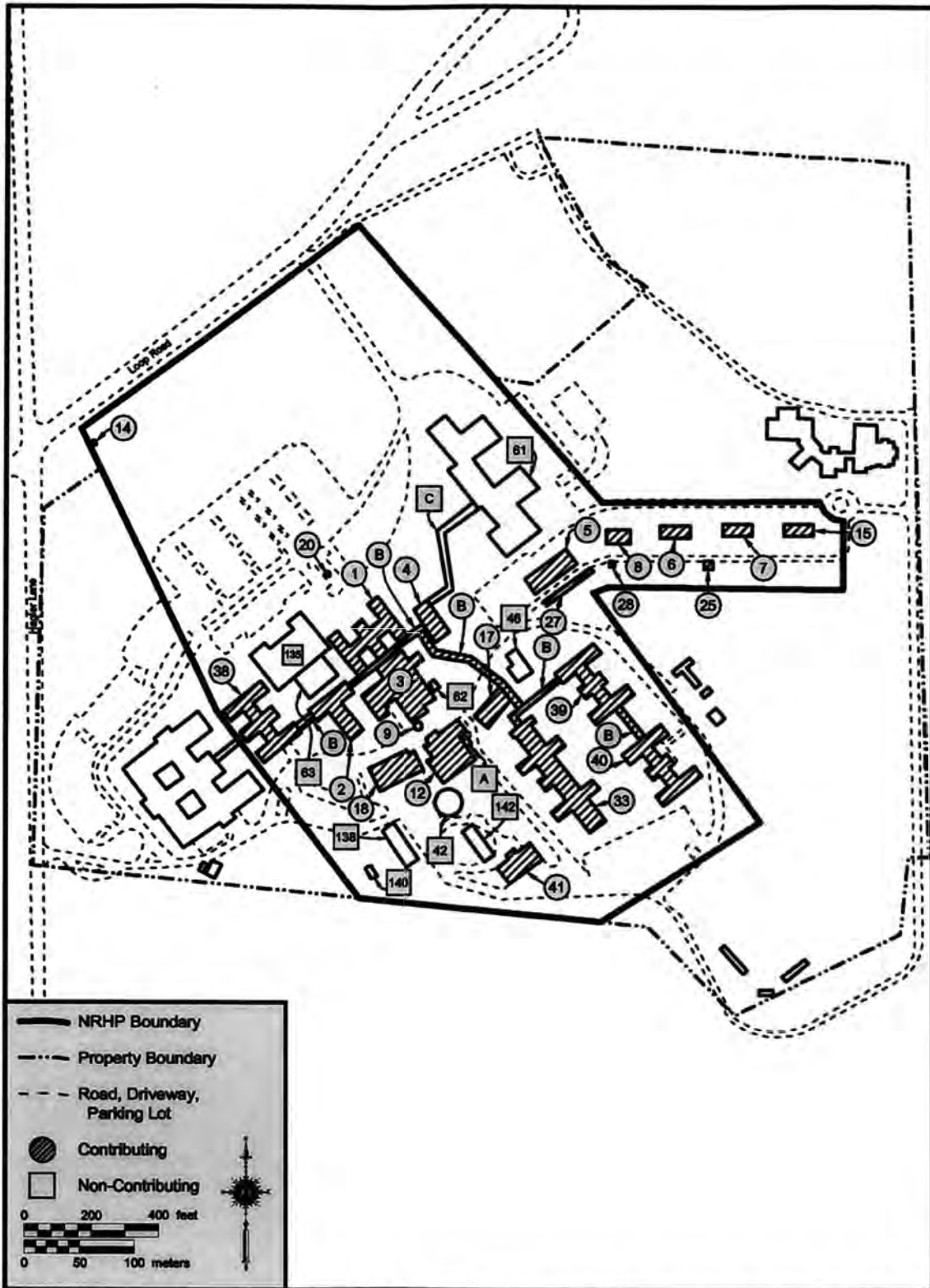
Sketch map indicating locations of photographs corresponding to those of the Photograph Continuation Sheet.



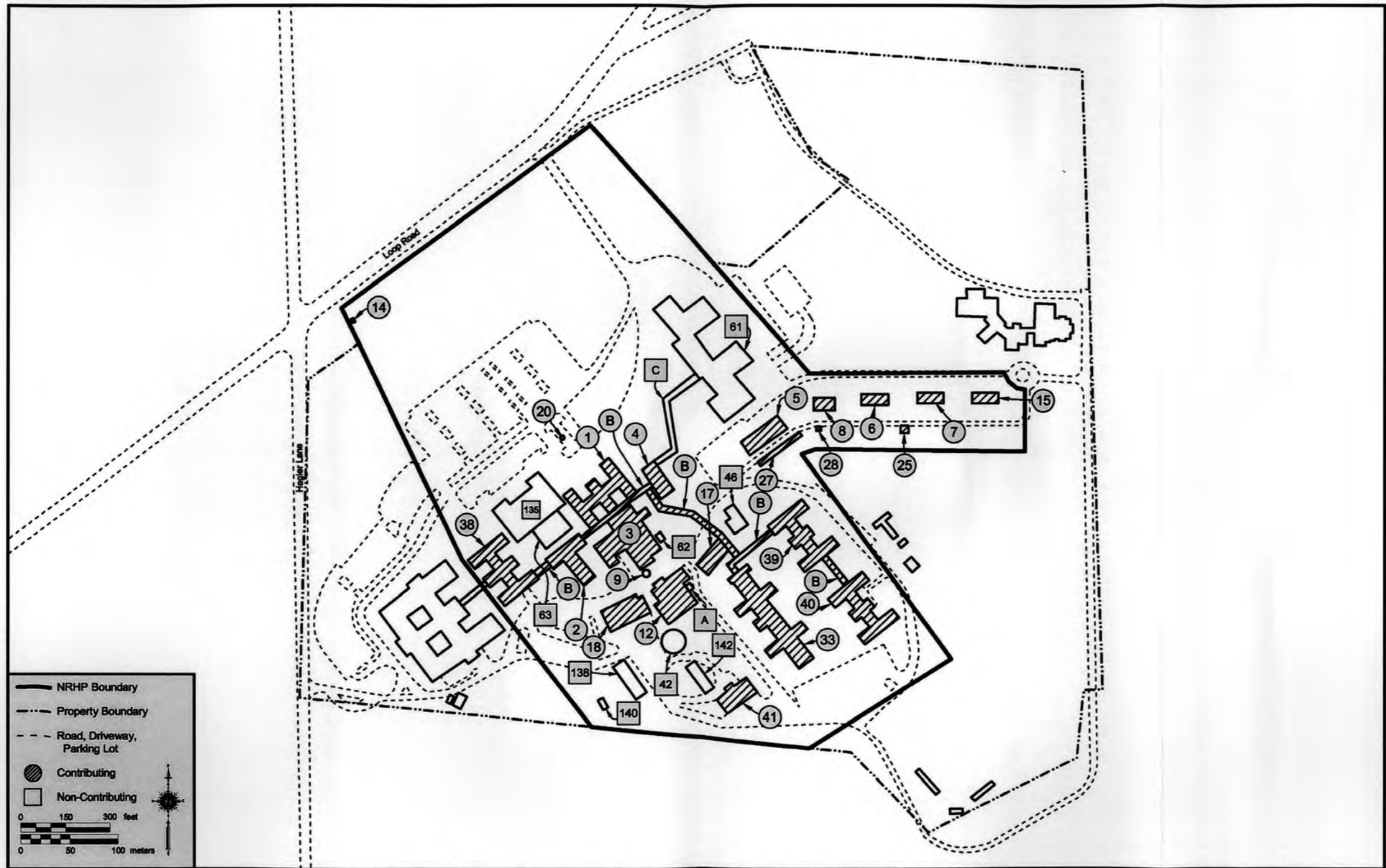
1969 Cottondale, Alabama 7.5-minute topographic quadrangle map showing Tuscaloosa VA Hospital.



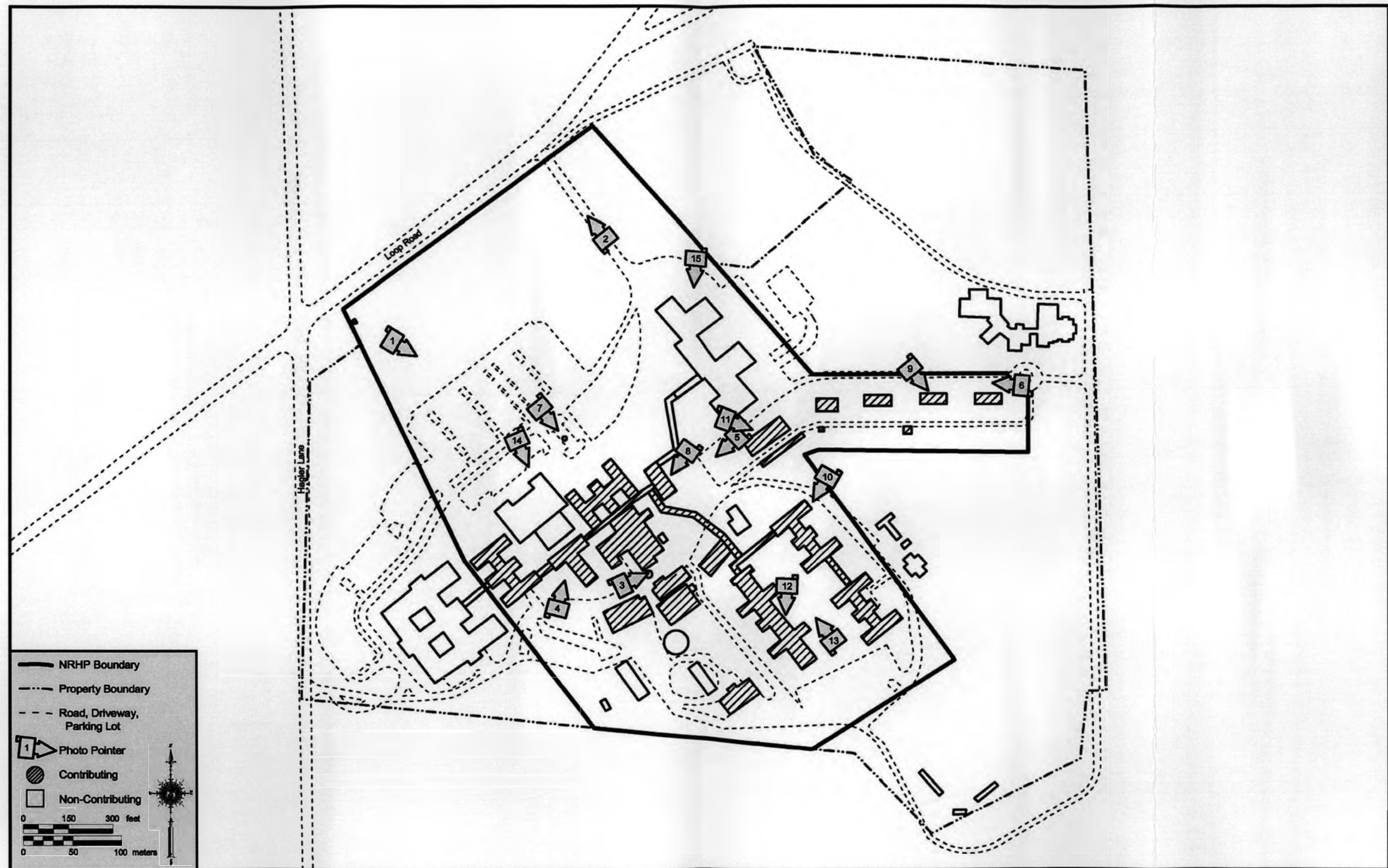
1971 (Photo revised 1983) Tuscaloosa, Alabama and 1969 (Photo revised 1983) Cottondale, Alabama 7.5-minute topographic quadrangle maps showing Tuscaloosa VA Hospital.



National Register boundary, contributing and noncontributing resources indicated on a sketch map.



National Register boundary, contributing and noncontributing resources indicated on a sketch map (oversize).



Sketch map indicating locations of photographs corresponding to those of the Photograph Continuation Sheet (oversize).

UNITED STATES DEPARTMENT OF THE INTERIOR
NATIONAL PARK SERVICE

NATIONAL REGISTER OF HISTORIC PLACES
EVALUATION/RETURN SHEET

REQUESTED ACTION: NOMINATION

PROPERTY Tuscaloosa Veterans Administration Hospital Historic Distric
NAME: t

MULTIPLE United States Second Generation Veterans Hospitals
NAME:

STATE & COUNTY: ALABAMA, Tuscaloosa

DATE RECEIVED: 2/10/12 DATE OF PENDING LIST: 3/02/12
DATE OF 16TH DAY: 3/19/12 DATE OF 45TH DAY: 3/28/12
DATE OF WEEKLY LIST:

REFERENCE NUMBER: 12000142

REASONS FOR REVIEW:

APPEAL: N DATA PROBLEM: N LANDSCAPE: N LESS THAN 50 YEARS: N
OTHER: N PDIL: N PERIOD: N PROGRAM UNAPPROVED: N
REQUEST: N SAMPLE: N SLR DRAFT: N NATIONAL: N

COMMENT WAIVER: N

ACCEPT RETURN REJECT 3.7.12 DATE

ABSTRACT/SUMMARY COMMENTS:

**Entered in
The National Register
of
Historic Places**

RECOM./CRITERIA _____

REVIEWER _____ DISCIPLINE _____

TELEPHONE _____ DATE _____

DOCUMENTATION see attached comments Y/N see attached SLR Y/N

If a nomination is returned to the nominating authority, the nomination is no longer under consideration by the NPS.



Ar-Tuscaloosa County - 2nd Generation Veterans Hospitals MPS - Tuscaloosa VA Hospital - 0001



Ar. Tuscaloosa County - 2nd Generation Veterans Hospital MPS - Tuscaloosa VA Hospital - 0002



Ar - Tuscaloosa County - 2nd Generation Veterans Hospital MPS - Tuscaloosa VA Hospital - 0003



AL - Tuscaloosa County - 2nd Generation Veterans Hospitals MPS - Tuscaloosa, VA Hospital - 0004



AL Tuscaloosa County - 2nd Generation Veterans Hospital MPS - Tuscaloosa VA Hospital - 0005



KL - Tuscaloosa County - 2nd Generation Veterans Hospitals MPS - Tuscaloosa VA Hospital - 0006



AL-Tuscaloosa County- 2nd Generation Veterans Hospital - Tuscaloosa VA Hospital - 0007



AL - Tuscaloosa County - 2nd Generation Veterans Hospital's MPS - Tuscaloosa VA Hospital - 0008



AL-Tuscaloosa County - 2nd Generation Veterans Hospitals MPS - Tuscaloosa VA Hospital - 0009



AL-Tuscaloosa County - 2nd Generation Veterans Hospitals (MS-Tuscaloosa VA Hospital) - 0000



At Tuscaloosa County - 2nd Generation Veterans Hospitals (MPS - Tuscaloosa VA Hospital) - 001



33

AL-Tuscaloosa County- 2nd Generation Veterans Hospitals MPS- Tuscaloosa VA Hospital- 0012



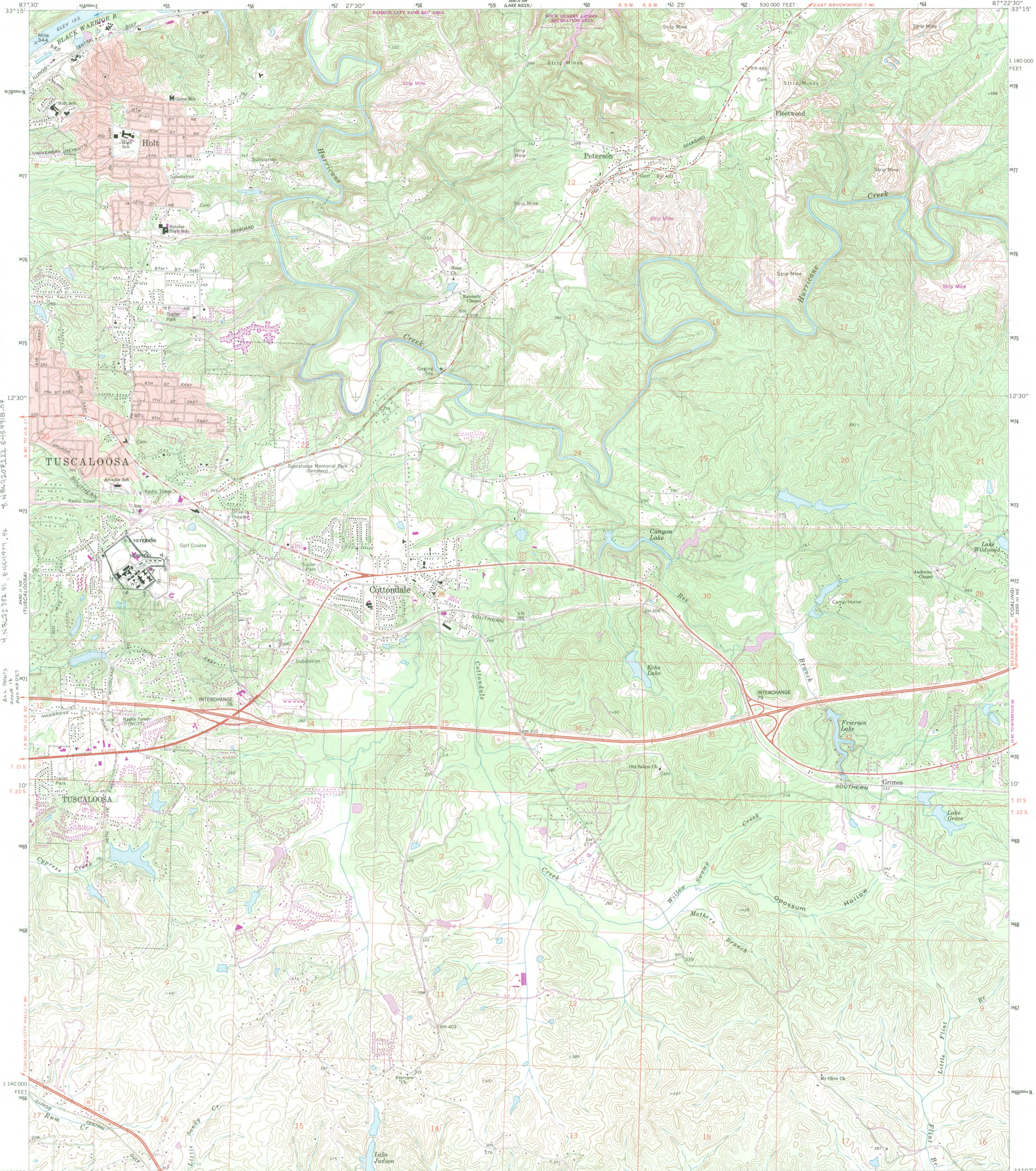
AL-Tuscaloosa County - 2nd Generation Veterans Hospital CAMPUS - Tuscaloosa VA Hospital - 0013



AL-Tuscaloosa county - 2nd Generation Veterans Hospital & MPS - Tuscaloosa VA Hospital - 0014



AL-Tuscaloosa County-2nd Generation Veterans Hospitals MPS-Tuscaloosa VA Hospital, 0015

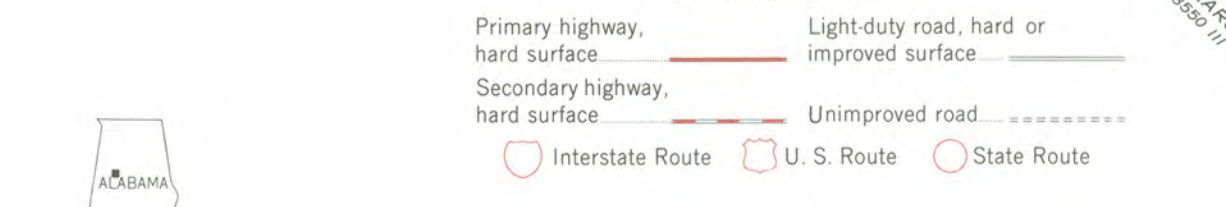
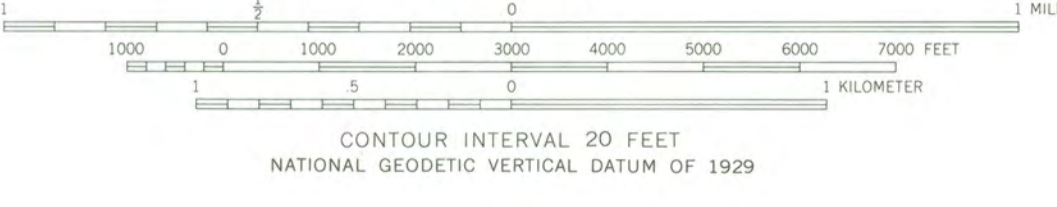


Tuscaloosa Veterans Administration Hospital, Historic District, Tuscaloosa County, AL
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 38. NBL21244.L6, E461373.56
 39. NBL21244.L6, E461373.56
 40. NBL21244.L6, E461373.56

Mapped, edited, and published by the Geological Survey

Control by USGS, NOS/NOAA, and Alabama Geodetic Survey
 Topography by photogrammetric methods from aerial photographs taken 1966. Field checked 1969
 Polyconic projection. 10,000-foot grid ticks based on Alabama coordinate system, west zone. 1000-meter Universal Transverse Mercator grid ticks, zone 16, shown in blue. 1927 North American Datum. To place on the predicted North American Datum 1983 move the projection lines 10 meters south as shown by dashed corner ticks
 Fine red dashed lines indicate selected fence and field lines where generally visible on aerial photographs. This information is unchecked
 Red tint indicates areas in which only landmark buildings are shown
 There may be private inholdings within the boundaries of the National or State reservations shown on this map

Revisions shown in purple and woodland compiled from aerial photographs taken 1981 and other sources. This information not field checked. Map edited 1983

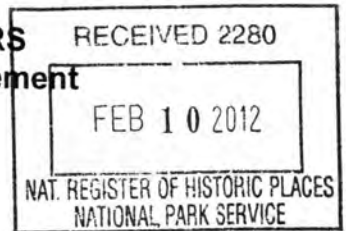


THIS MAP COMPLIES WITH NATIONAL MAP ACCURACY STANDARDS FOR SALE BY U.S. GEOLOGICAL SURVEY DENVER, COLORADO 80225, OR RESTON, VIRGINIA 22092 A FOLDER DESCRIBING TOPOGRAPHIC MAPS AND SYMBOLS IS AVAILABLE ON REQUEST

COTTONDALE, ALA.
 33087-84-TF-024
 1969
 PHOTOREVISED 1983
 DMA 3550 III NW-SERIES V844



DEPARTMENT OF VETERANS AFFAIRS
Office of Construction & Facilities Management
Washington DC 20420



February 10, 2012

Paul Loether, Director
National Register of Historic Places
National Park Service
1201 Eye Street NW
8th Floor
Washington, DC 20005

Dear Paul:

The Department of Veterans Affairs (VA) is pleased to submit the enclosed National Register of Historic Places nominations for our medical centers at Tuscaloosa, Montgomery, Tuskegee, Canandaigua, Batavia, and Lexington. These are individual nominations under our 2nd generation VA hospital multiple property cover.

If you have questions regarding these nominations, please feel free to contact me. I can be reached at 202-632-5529.

Sincerely,

A handwritten signature in cursive script that reads "Kathleen".

Kathleen Schamel,
Federal Preservation Officer



DEPARTMENT OF VETERANS AFFAIRS
Office of Construction & Facilities Management
Washington DC 20420

February 14, 2012

Paul Loether, Director
National Register of Historic Places
National Park Service
1201 Eye Street NW
8th Floor
Washington, DC 20005

Dear Paul:

The Department of Veterans Affairs (VA) recently submitted a National Register of Historic Places nomination for our Tuscaloosa medical center. We are requesting an expedited review by your staff since the medical center is pursuing an Enhanced Use Lease to develop building 33 for homeless veterans. In order to complete the successful project, the developer is applying for a tax credit allocation through the Alabama Housing Finance Authority (AHFA) for \$2.7 million. In order for the developer to receive the tax credit, the medical center must be formally listed on the National Register. The deadline for this application is March 8, 2012.

My office only learned of this situation on Friday, February 10, 2012, and transmitted the nomination to your office that day. We would appreciate any assistance your office can provide in expediting this important project with will provide housing for up to 50 homeless female veterans many of whom have children.

If you have questions regarding these nominations, please feel free to contact me. I can be reached at 202-632-5529.

Sincerely,

A handwritten signature in cursive script that reads "Kathleen".

Kathleen Schamel,
Federal Preservation Officer



"Enzweiler, Susan"
<Susan.Enzweiler@preserve
ala.org>

02/23/2012 02:52 PM

To "Edson_Beall@nps.gov" <Edson_Beall@nps.gov>
cc "smcgee@mapdevelopment.org"
<smcgee@mapdevelopment.org>, "Brown, Elizabeth"
<Elizabeth.Brown@preserveala.org>

bcc

Subject Tuscaloosa VA Hospital

History:

↩ This message has been replied to.

Hi Edson,

The Alabama Historical Commission concurs with the request of the Veterans Administration 's FPO to reduce the comment period to 3 days for the proposed NR listing of the Tuscaloosa VA Hospital. Thank you for your attention to this matter. Feel free to contact me if you have any questions.

Susan Enzweiler
National Register Coordinator
Alabama Historical Commission
468 S. Perry Street
P. O. Box 300900
Montgomery, AL 36130-0900

Office: 334/230-2644
Fax: 334/262-1083



DEPARTMENT OF VETERANS AFFAIRS
Office of Construction & Facilities Management
Washington DC 20420

February 24, 2012

Paul Loether, Director
National Register of Historic Places
National Park Service
1201 Eye Street NW
8th Floor
Washington, DC 20005

Dear Paul:

The Department of Veterans Affairs (VA) recently submitted a National Register of Historic Places nomination for our Tuscaloosa medical center. We are requesting that the public comment period be shortened to three days so that the developer of the Enhanced Use Lease will be able to make the deadline to apply for state tax credits.

We would appreciate any assistance your office can provide in expediting this important project with will provide housing to up to 50 homeless female veterans many of whom have children.

If you have questions regarding these nominations, please feel free to contact me. I can be reached at 202-632-5529.

Sincerely,

A handwritten signature in cursive script that reads "Kathleen".

Kathleen Schamel,
Federal Preservation Officer



This is to certify that the

Tuscaloosa Veterans Administration Hospital Historic District

was entered into the

National Register of Historic Places

on

March 7, 2012

The National Register of Historic Places is the official list of the Nation's historic places worthy of preservation. Authorized by the National Historic Preservation Act of 1966, the National Register of Historic Places is part of a national program to coordinate and support public and private efforts to identify, evaluate, and protect America's historic and archeological resources. The National Register of Historic Places is administered by the National Park Service, U.S. Department of the Interior.

J. Paul Loether, Chief, National Register of Historic Places