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 *How to Complete the National Register of Historic Places Registration For* (National Register Bulletin 16A). Complete each item by marking "x" in the appropriate box or by entering the information requested. If an 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 instruction. Place additional entries and narrative items on continuation sheets (NPS Form 10-900a). Use a typewriter, word processor, or computer, to complete all items.

1. Name of Property			
historic name: Maplewood			
other names/site number: David C. Voorhees Hous	John A. Voor	thees House	
2. Location			
street and number: Burnt Hill Road at Rock Brook		/	N/A not for publication
city or town: Montgomery Township		a st	N/A vicinity
	: Somerset County	(35)	zip code: 08558
3. State/Federal/Tribal Agency Certification		00	
Signature of certifying official Title Assistant Commissioner, Natural State or Federal agency and bureau	cumentation standards for regional requirements set forth in peria. I recommend that this per inuation sheet for additional constraints of the state	istering properties in the N 36 CFR Part 60. In my op operty be considered sign omments.)	lational Register of binion, the property ifficant
State or Federal agency and bureau	American Indian Tribe		
4. National Park Service Certification	· · · · · · · · · · · · · · · · · · ·		
	Signature of the Keeper	Mo	Date of Action

5. Classification

Ownership of Property (Check as many boxes as apply)	Category of Property (Check only one box)		esources within Property reviously listed resources in the	
private	X building(s)	Contributing	Noncontributing	
, public-local	district	1	1	buildings
X public-State	site			sites
public-Federal	structure		1	structures
	object			objects
		1	2	Tota
Name of related multiple pr (Enter "N/A" if property is not part of		Number o	of contributing resources in the	previously listed National Registe
N/A				N/A
6. Function or Use	· · · · · · · · · · · · · · · · · · ·			·····
Historic Functions	storic Functions		Current Functions	
(Enter categories from instructions)		(Enter categories	from instructions)	
Domestic		Vacant/Not In	Use	
Health Care				
Historic Subfunctions		Current Subf	unctions	
(Enter subcategories from instruction	ns)	(Enter subcategories from instructions)		
Sanatorium				
Single Dwelling				•
7. Description	4			
Architectural Classification		Materials		
(Enter categories from instructions)	m instructions)		from instructions)	
Greek Revival		Foundation	Brick	
			Stone	
		Walls	Weatherboard	
		Roof	Asphalt	
			Metal	
	·	Other	Brick	
Narrative Description				

Narrative Description

(Describe the historic and current condition of the property on one or more continuation sheets.)

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.)

- X 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.
- X 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 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 of age or achieved significance within the past 50 years.

Areas of Significance

(Enter categories from instructions)

Architecture Health/Medicine

Period of Significance

1845-1952

Significant Dates

1845 1898

Significant Person

(Complete if criterion B is marked above)

N/A

Cultural Affiliation

Architect/Builder

unknown

9. Major Bibliographical References

Bibliography

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

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

recorded by Historic American Engineering Record

See continuation sheet for additional HABS/HAER documentation.

10. Geographical Data

Acreage of Property: 6.89

UTM References

(Place additional UTM	I references on a	continuation sheet.)
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1	18	526820	4473525
	Zone	Easting	Northing
2			

Zone Easting

3

4

Primary location of additional data:

Jersey State Archives)

State Historic Preservation Office

X Other State Agency (Repository Name: New

Northing

See continuation sheet

Verbal Boundary Description

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

Boundary Justification

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

Somerset County, New Jersey Maplewood County and State Name of Property 11. Form Prepared By name/title: Stacy E. Spies, Architectural Historian organization: Stacy E. Spies, Architectural Historian date: 11/1/1999 telephone: (908) 889-0161 street & number: 407 Warren Street zip code: 07076-1920 city or town: Scotch Plains state: New Jersey **Additional Documentation** Submit the following items with the completed form: **Continuation Sheets** Maps A USGS map (7.5 or 15 minute series) indicating the property's location. A Sketch map for historic districts and properties having large acreage or numerous resources. **Photographs** Representative black and white photographs of the property Additional items (Check with the SHPO or FPO for any additional items) **Property Owner** (Complete this item at the request of the SHPO or FPO.)

name: State of New Jersey, Dept. of Hu	ne: State of New Jersey, Dept. of Human Services		
street & number: PO Box 700		telephone:	
city or town: Trenton	state: New Jersey	zip code: 0862	25-

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. 470 *et seq.*).

Estimated Burden Statement: Public reporting burden for this form is estimated to average 18.1 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, P.O. Box 37127, Washington, DC 20013-7127; and the Office of Management and Budget. Paperwork Reductions Projects (1024-0018), Washington, DC 20503.

US GOVERNMENT PRINTING OFFICE : 1993 O - 350-416 QL 3

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number 7 Page 1

Maplewood, Somerset County, New Jersey

NARRATIVE DESCRIPTION

Maplewood is a Greek Revival building of substantial size and detail constructed in 1845 (Photograph No. 1). The gabled-roof, clapboard-clad building of pegged, mortise-and-tenon construction faces south atop a gently-sloping site and overlooks Rock Brook and Burnt Hill Road. A drive lined with maple and oak trees leads from Burnt Hill Road past the western elevation of the house (Photograph No. 2) and connects to a semi-circular drive at the north elevation of the house and to Maplewood Drive, an interior road in the former New Jersey State Village for Epileptics complex. A small barbeque pavilion and a concrete block garage constructed outside the period of significance are located at the western edge of the drive, beside the house. The original front (south) yard includes an overgrown terraced garden edged with brick (Photograph No. 3). The overall condition of the building is fair, largely as a result of water damage caused by a lack of maintenance. The building retains a high level of integrity of location, design, setting, materials, workmanship. feeling and association.

The site is surrounded by the remainder of the former New Jersey State Village for Epileptics (most recently named the North Princeton Developmental Center) complex. The approximately 1,030-acre complex, located on former farmland, consists of nearly 100 remaining buildings constructed throughout the second half of the nineteenth century and the entirety of the twentieth century. Winding drives connect the former administrative buildings, industrial buildings, single-family and group residences and ward buildings, as well as a school, a recreation building, a working dairy farm, and the farmhouses that served as the earliest facilities for the Village. Twentieth-century, single-family dwellings on large, wooded lots are located on the south side of Burnt Hill Road.

Maplewood is a 2 ¹/₂-story house seven bays wide and two bays deep and covered with clapboards. The spacing of the fenestration appears to indicate that it was originally a five-bay, center-entrance dwelling with a lateral two-bay extension to the west. This extension appears in an image of the house in Snell's 1881 History of Hunterdon and Somerset Counties. A two-story, single-bay-wide wing constructed in 1928¹ is attached to the east elevation. A single-story, single-bay-wide kitchen wing constructed prior to 1881 is attached to the west elevation. A narrow, flat-roofed frame porch with square posts and lattice walls is located at the west end of the north elevation. The main block roof is covered with composition shingles; the wings have metal roofs. The overhanging eaves have a shallow cornice above a plain, wide frieze. The gutters are set into the slope of the roof and connect to modern metal downspouts. An exterior brick chimney is located in the east gable end and two interior, pargetted chimneys are located in the west end. The east chimney was constructed ca. 1928, replacing two earlier interior pargetted chimneys. A fifth chimney that pierced the south slope of the roof was removed at an unknown date. The 6/6 double-hung wood sash windows located throughout the house have metal storm windows. The shutters on the first floor are paneled and the shutters on the second floor are louvered. Three-light kneewall windows are located in the attic story of the south elevation, each with small paneled shutters. The brick foundation at the front and rear elevations

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number <u>7</u> Page <u>2</u> Maplewood, Somerset County, New Jersey

is keyed into ashlar foundation walls on the east and west elevations (Photograph No. 4). There are three, three-light basement windows on the south elevation.

The south (original main) elevation is emphasized with a parapeted, flat-roof porch centered over two window bays and the main entrance (Photograph No. 5). The screened porch is supported by fluted Doric columns with square, paneled pilasters on the façade. The porch floor and ceiling are tongue-and-groove. The porch was constructed in 1904,² replacing a small, flat-roofed Greek Revival portico illustrated in Snell and in newspaper accounts of the opening of the Village.³ The six-panel, wood exterior door is surrounded by a detailed transom and sidelights and paneled pilasters. The transom and sidelights are rectangular panes of glass with delicate metal grilles that give the appearance of leading (Photograph No. 6). The grilles are attached to the window frame just above the surface of the glass.

The north (original rear) elevation is nearly the same as the south elevation, with the omission of a transom over the door and the addition of a glazed bay window above the porch roof. The extant, flat-roof porch constructed in 1904⁴ is topped with a paneled parapet. In 1942 a *porte cochere* and the porch's fluted Doric columns were replaced with square columns.⁵ The porch's tongue-and-groove wood floor was also replaced at that time with a concrete floor inlaid with slate flagstones. The second-floor bay window projects from beneath a heavy cornice and is enclosed by panes of glass from floor to ceiling. The fenestration treatment mimics the transom and sidelights at the first floor.

The two-story, flat-roofed east wing has a poured concrete foundation. A single bay of windows is located on the east elevation of the main block of the house to either side of the addition, and two 6/6 attic windows flank the chimney. The west elevation contains a single-story kitchen wing constructed before 1881.⁶ The flat roof is encircled by a paneled parapet identical to that located atop the north porch. A flat-roofed portico shelters a doorway on the west elevation.

The building's current orientation is to the north along a paved, semi-circular drive lined with ornamental trees and shrubs. The original orientation was to Burnt Hill Road and Rock Brook to the south. With the creation of the Village, the orientation was altered to reflect the building's new association. The house is loosely divided into two sections, reflecting its likely original demarcation of spaces for family members and for hired hands or servants. The eastern two-thirds of the house feature more finished treatments than in other areas, and the rooms center around the formal staircase that winds to the third floor. Paired parlors and bed chambers flank the stair on the first and second floor and a finished bed chamber is located at the east end of the third (attic) floor. The western one-third of the house and the remainder of the third floor (extant but walled-off on the second floor). This one-third features simpler treatments than those located in the eastern two-thirds. All areas of the house are accessible from any of the staircases via doorways between the sections.

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number <u>7</u> Page <u>3</u> Maplewood, Somerset County, New Jersey

Today, one enters the building through the north elevation. The cross-and-bible paneled wood exterior doors have inset locks, brass knobs, and brass plates. Paneled woodwork is located beneath the sidelights (Photograph No. 8). A center hall connects the north and south doorways. The dog-leg stair with a narrow open well has a turned balustrade and newel post that face the south entrance (Photograph No. 9). The stair enclosure is paneled wood with a small cupboard set beneath the stairs. A tiny toilet room is squeezed between the north door and the stair. Four doors with Greek Revival moldings with "ears" lead from the hallway to twin parlors to the east and west (Photograph Nos. 8 and 10).

The walls and ceilings throughout the house are finished with white-painted plaster. The rooms throughout the first floor are decorated with 12-inch baseboards capped with a molded cap; second-floor rooms have similar baseboards without the cap. There are no crown moldings. A chair rail is located in the west parlors. Four-panel wood doors with porcelain or brass knobs, rimlocks and inset locks, and Greek Revival surrounds are located throughout the house. The double-hung, wood sash windows have thin muntins and wavy glass. The first floor windows have Greek Revival surrounds with "ears"; the second floor windows have molded surrounds without the "ears." Doors throughout the house are four-panel wood.

The first floor parlors have narrow, blond, tongue and groove flooring with a darker border that was installed in the early-to-mid-twentieth century, based on their appearance. The window surrounds are partially obscured with wood cornice boxes that once contained curtain rods. Two molded panels are located beneath each window on the first floor. The twin parlors east and west of the center hall are connected by paneled wood pocket doors with a shallow molded surround. The fireplaces that corresponded to the paired chimneys visible in period depictions of the house were removed in 1925.⁷

The small sitting room located in the east wing contains a Craftsman-style, river rock fireplace surround (Photograph No. 11). This design is similar to the fireplace constructed by patients in 1911 in the "Bungalow," which served as the recreation building.⁸ Full-height built-in bookshelves fill the north wall of the wing. Additional built-ins fill the west wall beside and above the fireplace.

The kitchens and dining area are located in the west end of the house. The southwest breakfast room contains a red. black and green checkered linoleum floor (Photograph No. 12). The walls are covered with ca. 1940s knotty pine paneling. A firewall partition of recent construction (within the last 15 years) forms the north wall. A built-in Colonial Revival-style corner cabinet is located in the southwest corner of the room next to the doorway to the south kitchen. The doorway has a Greek Revival surround; however, the door is a mid-twentieth-century, louvered glass door with a metal handle. A fireplace is located beside the doorway on the west wall. The chimney breast is covered with paneling and the opening is surrounded with a single course of buff-colored, twentieth-century bricks. This surround was likely laid during the 1920s; A similar brick surround is depicted in a photograph of the interior of the new nurses' building in 1928.⁹

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number <u>7</u> Page <u>4</u> Maplewood, Somerset County, New Jersey

The narrow (3'6" wide) hallway on the north side of the firewall is finished with the same knotty pine paneling and checkered floor as that located in the breakfast room. A straight-run stair leading to the second floor is located at the east end of the hallway. A sealed doorway leads to the north kitchen and a small closet is located on the north wall in the west wing. A glass and wood exterior door fills the west end of the hallway.

The south kitchen is located in the west wing. The checkered floor continues into this room, which has plastered walls. A porcelain sink set into metal base cabinets is located at the south wall. Metal wall cabinets are located on the south wall on either side of the window. This room has simpler finishes than those in the main block, reflecting its purpose as a service wing. The windows have simple, flushboard surrounds and the baseboards appear to date from the 1920s or 1930s. The north kitchen is located in the northwest corner of the main block. Apparently remodeled during the 1960s or 1970s, the room has a dropped ceiling, vinyl sheet flooring, and plastic laminate cabinets. The large windows have surrounds likely constructed during the 1920s or 1930s, based on their appearance. A work room located at the north end of the west wing has similar treatments to the north kitchen. A nineteenth-century, double-leaf door leads to a straight-run stair to the basement.

The formal center stair leads from the first-floor entrance hall to a landing at the height of the porch roof. A metal-lined window well, likely for plants, is located in the bay window that overlooks the porch roof (Photograph No. 13). The bay window, as seen from the exterior, contains a center six-light awning window flanked by vertical, four-light "leaded" windows on the north and side elevations and topped by a "leaded" transom window spanning the width of the bay. The flanked, six-light windows open directly into the stairwell between the first and second floors. The transom window provides light to an interior window in the kneewall at the landing between the second and third floors.

The second-floor chambers are placed in pairs on either side of the stair hall. A single molded panel is located beneath each window in the eastern section of the second floor (Photograph No. 14). The wood floors are similar to those on the first floor. The two west chambers in the east section have a side-hung double door in the center of the shared wall.

The north bathroom has plaster walls and ceiling with rectangular white "subway" tile along the walls. Opalescent, dark green liner tile encircles the room near the top of the tile wainscot. A white porcelain pedestal sink and the round-end tub feature metal and porcelain faucets. The floor is covered with small ceramic tiles in a check pattern. The south bathroom has plaster walls and ceiling with mint green fixtures and a matching mint green tile wainscot. The floor is covered with vinyl tile. The rounded cabinets and countertop are covered with plastic laminate in a light, wood-grain design with round, aluminum pulls. The third bathroom is centrally-located at the top of the stairs. The peach- and pink-colored tile appears to be contemporary with the other bathrooms on this floor.

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number 7 Page 5

Maplewood, Somerset County, New Jersey

Three small chambers and a fourth, late twentieth-century bathroom are located in the western section of the second floor. This section contains simpler treatments and architectural features than those in the east section. No panels are located beneath the windows, and the baseboards have only a chamfered cap. The door surrounds are flushboards with a narrow applied molding. The varnished floors are constructed of narrow, tongue-and-groove boards and appear to date from the nineteenth century or early twentieth century. Sheet-vinyl flooring is located in the hall.

The formal center stair leads from the second-floor hall to a short hall at the third (attic) floor. The hallway and two chambers on this floor are finished; the remaining rooms are unfinished or only partially finished. A chamber is centered in the east end of the house and is reached via a narrow hallway adjacent to the stair hall (Photograph No. 15). The walls and ceiling are covered with plaster. The varnished floors in the chamber and hallway are constructed of narrow, tongue-and-groove boards and appear to date from the nineteenth century or early twentieth century. The doorways and windows are framed with reeded trim; the door trim has blank plinth blocks. A mixture of salvage doors connect the rooms: six-panel wood; four-panel wood-and-glass doors. The simple baseboards have small, ogee caps.

A bathroom is located in the east section at the south elevation. The walls are plastered and the floor is covered with sheet vinyl. The institutional ceramic fixtures date from the 1940s or 1950s, based on their appearance.

The west section of the attic level contains a hallway with a wood winder stair and one finished room (Photograph No. 16). The walls and ceilings in the chamber are covered with plaster. The walls in the hall are constructed of vertical boards. The floors in the chamber and hallway are constructed of narrow, tongueand-groove boards and appear to date from the nineteenth century or early twentieth century. The hall floors are painted and the chamber floors are varnished. The doorways and windows are framed with reeded trim with blank corner blocks; the door trim has blank plinth blocks. The simple baseboards have no caps.

The structural system of the building is visible in the unfinished attic located at the center of the house and in the four unfinished rooms under the eaves at the outer corners of the building. The building is constructed of pegged, mortise-and-tenoned hewn members (Photograph No. 17). The hewn posts are strengthened with diagonal corner braces and the walls are infilled with brick nogging. The roof framing was most likely replaced during early twentieth century, as evidenced by the combination of circular- and vertical-sawn members and dimensional lumber. A cedar shake roof (located beneath the extant asphalt shingle roof) is visible from the attic. The rough-plastered walls are intermittently covered with horizontal beaded boards. The floors are covered with wide planks.

A darkroom constructed of beaded vertical board is located in the northwest corner of the center, attic section. It contains a large porcelain sink and wood counters. A small, square, red-glass window with a

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number <u>7</u> Page <u>6</u> Maplewood, Somerset County, New Jersey

sliding shutter is located in the south wall of the darkroom. A fixed wood ladder leading to a hatch door in the roof is located at the west end of the attic section.

Endnotes

1. Thirty-First Annual Report of the Board of Managers of the New Jersey State Village for Epileptics for 1928 (Skillman, The New Jersey State Village for Epileptics, Printers, 1929), 18.

2. Seventh Annual Report of the Board of Managers of the New Jersey State Village for Epileptics for 1904 (Paterson: News Printing Company, State Printers, 1905), 16.

3. James P. Snell, *History of Hunterdon and Somerset Counties* (Philadelphia: Everts & Peck, 1881) and Newspaper article from the *New York Herald*, dated November 2, 1898, depicting Maplewood. New Jersey State Archives, Record Group: Department of Institutions and Agencies, Subgroup: NJ State Village for Epileptics, Series: Photographs, Box: 28, Newspaper Scrapbook.

4. Seventh Annual Report, 16.

5. Tenth Annual Report of the Board of Managers of the New Jersey State Village for Epileptics for 1907 (Trenton: MacCrellish & Quigley, State Printers, 1908), photo plate.

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6. Snell, *History*, photo plate.

7. Twenty-Eighth Annual Report of the Board of Managers of the New Jersey State Village for Epileptics for 1925 (Skillman, The New Jersey State Village for Epileptics, Printers, 1926), 16.

8. Thirteenth Annual Report of the Board of Managers of the New Jersey State Village for Epileptics for 1910 (Burlington: Enterprise Company, State Printers, 1911), 20A.

9. Thirty-First Annual Report, 15.

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number <u>8</u> Page <u>1</u>

Maplewood, Somerset County, New Jersey

STATEMENT OF SIGNIFICANCE

Maplewood is significant under Criterion A as the original primary building that housed the New Jersey State Village for Epileptics, one of just thirteen such institutions created in the United States, and under Criterion C as an excellent example of a large and well-defined Greek Revival dwelling. Constructed in 1845 as the home of the locally-prominent John A. Voorhees family, the house remained in the family until 1898 when it was purchased by the state to create the Village. The Village's design is a product of contemporary thought at the turn of the twentieth century about the treatment of epileptics and people with mental illnesses. Through the nineteenth century, and, sadly, well into the twentieth century, people with epilepsy were incarcerated in mental institutions or hidden away at home due to the perception that the disease was hereditary, or contagious, or both. Until the creation of the Village, people with epilepsy were given little prospect of leading a normal life. The farm colony concept, popularized in Europe during the late nineteenth century for the treatment of mental illness and tuberculosis, was adapted to the particular needs of people with epilepsy in New Jersey. This concept was utilized to provide a healthy environment where people with epilepsy could be active participants in a community, undertake meaningful employment, and receive proper medical treatment. Maplewood is an important symbol of the Village's mission "to secure the humane, curative, scientific and economical treatment and care of epileptics"¹ until its closure in 1952.

The handsome, Greek Revival-style dwelling was constructed in 1845 by John A. Voorhees on his farm near Skillman. Voorhees died in 1876 and left the farm to his son David C. Voorhees. David C. Voorhees was a progressive agriculturalist known for his use of scientific farming methods, and the family farm -- known as Maplewood -- earned a reputation as one of the finest in the region during the last quarter of the nineteenth century. Voorhees died in 1898 and later that same year his heirs sold the farm to the State of New Jersey as the site of its planned Village for Epileptics. After serving briefly as the sole primary building (first containing both office and dormitory space and later serving as the Administration Building) on the property, the former Voorhees house came to be the Superintendent's Residence. The house would continue to be used in this capacity for the duration of the Village.

Between the end of the Civil War and the beginning of the First World War the State of New Jersey greatly expanded its institutional system. A number of specific institutions appeared during this reform movement to provide for veterans, delinquent children, the insane, tuberculosis sufferers, and other disadvantaged and mentally and physically disabled individuals. These groups had previously been ignored or mishandled. The New Jersey State Village for Epileptics was founded in an effort to provide an improved environment for individuals with epilepsy, which at the time was a broad term encompassing a range of central nervous system disorders that produced seizures and convulsions. Prior to the establishment of the Village, people with epilepsy were either kept at home or placed in institutions for the mentally ill or feeble-minded, alms houses, or jails.

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number <u>8</u> Page <u>2</u>

Maplewood, Somerset County, New Jersey

The first official action in New Jersey to address the special care needed by epileptics was taken in 1877 by Dr. John Ward, Superintendent of the New Jersey State Hospital in Trenton, in which he requested a separate building be constructed for them.² This attempt was unsuccessful; however, others continued to work toward more humane treatment for people with epilepsy. During this time, Rev. Stephen Olin Garrison was operating the successful Training School at Vineland for the mentally retarded. Garrison wanted the institution "to be more than a training school. He dreamed of a 'village,' a little community on marginal land where the retarded might live and be made more or less self-sustaining in a world suited to their needs and capabilities. His dream was a humane version of the 'cottage plan' and 'farm colony' that were to dominate thinking about custodial care for the retarded in the coming generation."³ He achieved his dream. At that time, people with epilepsy were located at the Vineland facility, as well as at many other institutions throughout the state. In order to address his concerns about their treatment at these inappropriate facilities, Garrison rounded up support from the medical profession to support the creation of a separate institution for people with epilepsy.

In 1895 the New Jersey Legislature established a commission, of which Garrison was the secretary, to formally investigate the issue of epilepsy within the State. The commission presented its study to the Legislature the following year. The study concluded that there were approximately 2,000 people with epilepsy in New Jersey, including 450 in State hospitals for the insane,⁴ and that the care of these individuals throughout the state was wholly substandard. The Village was planned as a way to address this issue through the removal of people with epilepsy to an institution solely for their care and sited in a healthy, rural environment.⁵ Like the institution at Vineland, Skillman was conceived as a "rural 'village' where afflicted people could live a wholesome life and contribute by their labor to their own support."⁶

Until the creation of the Village, institutional care in the nineteenth century was damaging to those with epilepsy; however, life outside the institutions was just as damaging in its own ways. The care of people with epilepsy in the mental institutions was obviously injurious to all patients. As stated in 1899, people with epilepsy in these facilities were "practically imprisoned in an environment which cannot but depress them; while the insane, especially liable to excitement or depression, many of the more curable being abnormally sensitive to everything sudden or startling, are liable to have forced upon them at any moment the spectacle of a convulsive seizure."⁷ Outside of institutions, people with epilepsy did not fare much better. It was believed that people with epilepsy had a "demoralizing" effect on the family if they lived at home. In addition to the commonly-held belief that epilepsy, like mental illness, was hereditary, it was believed in 1899 that it was also contagious: "frequently the embarrassment and discouragement of the family contributes more to the increase of epilepsy or feeble-minded children than any hereditary taint may have done."⁸ If a person with epilepsy surmounted these biases and was able to work at a trade, he or she often had difficulty remaining employed after a seizure occurred in the workplace, in spite of their qualifications for that position.⁹ People with epilepsy were not allowed to attend church or go to school. Public acceptance was still many years away.

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number <u>8</u> Page <u>3</u>

Maplewood, Somerset County, New Jersey

The Bielefeld Epileptic Colony established in Germany in 1869 served as the model for all American epilepsy institutions as well as for tuberculosis sanatoria of the time. As described in 1899, Bielefeld "began with a cottage, a garden and 12 patients. It [now] consists of a farm of 1,350 acres, upon which are cottage homes adapted to the various grades of patients, of whom there are 1,200. The success of this colony led to the establishment of a number of similar institutions in Germany, France, Switzerland, Holland, and Sweden."¹⁰ Colonies in France and Germany were considered to have made the "greatest progress ... in the care and cure of epileptics" by the last years of the nineteenth century.¹¹ The commission recommended that the Legislature establish a separate institution solely for the care of people with epilepsy, using as an example two recently-constructed facilities in Ohio and New York that were visited by the commission.¹² The New Jersey State Village for Epileptics was the sixth of thirteen institutions constructed specifically for people with epilepsy in the United States between 1893 and 1944.¹³ Others among the thirteen included: the Ohio Hospital for Epileptics at Gallipolis that opened in 1893 and had 600 patients by 1898; the Craig Colony, a 1,872-acre facility in Sonyea (near Geneseo), New York, that opened in 1897 and had 322 patients by 1898; the Pennsylvania Epileptic Hospital and Colony Farm in West Chester, Pennsylvania (1892): the Abilene (Texas) State Hospital Epileptic Colony (1899); the Pauls Valley (Oklahoma) State Hospital for Epileptics (1944-5); two other facilities in Pennsylvania; and one facility each in Kansas and Massachusetts.¹⁴ By the late 1930s, an estimated 10,000 patients in eleven states resided in institutions for people with epilepsy. People with epilepsy in the other 37 states, however, were still committed to mental institutions.¹⁵

An examination of the brief survey of the facilities constructed in other states prompted the Legislature to take up the cause with the belief that regimented institutional living and medical care could cure people of epilepsy and prevent its spread. Isolation of people with epilepsy in institutions was considered "wise, just and humane."¹⁶

"Thoughts that epilepsy was hereditary in nature and that spreading the disease through reproduction could be controlled were advanced by Senator Stokes in support of a bill for an epileptic colony... '[T]hese unfortunates who are denied means of support in competitive labor, could with proper buildings and land, in time support themselves in colony or village life... [A]s a large probability of cure and alleviation rests with special hygienic and medical care, every consideration of economy, philanthropy, health, and the spreading of the malady by reproduction, demands immediate provisions."¹⁷

By 1897 the Legislature passed a bill providing for the establishment of a "Village for Epileptics" that was signed by Governor Foster M. Voorhees in 1898. Although the public beliefs that led to the creation of the Village were misinformed, at the Village people with epilepsy would, at least, receive medical care and be allowed to be productive members of a community.

The first task of the Board of Managers of the New Jersey State Village for Epileptics was the selection of a suitable location for the proposed facility. A number of selection criteria were established by the Board. The facility would need to be in the central part of the state; on or near a railway line; in a rural, preferably remote, area; on fertile lands to allow for self-supporting farming; contain buildings that could allow for the

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number <u>8</u> Page <u>4</u> Maplewood, Somerset County, New Jersey

immediate support of patients; and have sufficient room for separate facilities for men and women. The search ended with the purchase of "Maplewood farm" from the heirs of David C. Voorhees for \$11,500 in 1898.

"After weeks of examining farms the Managers unanimously decided upon the Maplewood farm, situated in Somerset County, a mile and a half from the Skillman station, on the main line of the Philadelphia Railroad, and two and a half miles from the Rocky Hill station, on the Pennsylvania Railroad. The farm consists of about one hundred and eighty-seven acres, in an excellent state of cultivation, and on which is an ancestral mansion of twenty rooms, singularly well adapted, after a few alterations, for the immediate reception fifteen or twenty patients. There are also two small tenant houses in good repair on the farm, together with numerous, but small outbuildings. There are several springs, and a never failing stream of water runs through the farm; also many fruit and shade trees on the premises."¹⁸

In the interest of future expansion, the Board of Managers also acquired an option to purchase an adjacent 215 acre farm for an additional \$8,000. Upon execution of the deed for the Voorhees property on November 1, 1898, the New Jersey State Village for Epileptics was declared open for the reception of patients.

Maplewood, the two former Voorhees tenant houses, and various former Voorhees outbuildings housed all of the Village's operations during the first two years of its existence. Plans for expansion included acquisition of additional adjacent farm properties and the construction of cottages (small dormitories) and other necessary buildings as the population grew.¹⁹ Eight male patients were admitted in 1899.²⁰ The first patients selected were "competent to work at several trades best adapted to contribute to self-support, such as blacksmith, tailor, shoemaker, harnessmaker, bricklayer, and carpenter; also, farming, domestic work and laborers."²¹ The Village's Board of Managers' intent was to use patients to construct additional buildings and to farm the property. This arrangement would allow the Village to be somewhat self-sufficient and would provide the patients with productive work when they were able.

Two additional farm properties, the J. Voorhees property known as "Fernwood" to the west of the Voorhees house, and the H. Terhune farmstead east of Burnt Hill Road, were acquired in 1900. The dwelling at Fernwood was adapted for use as a female patients' dormitory (8 patients in 1900) and the former Terhune house was altered to serve as the male patients' dormitory (10 patients in 1900). The following year there were eight female and seventeen male patients, with a capacity for 80 patients.²² Maplewood no longer housed patients and became the Village's Administration Building and Superintendent's and Steward's residence. Two cottages and several support buildings were also under construction in 1900, and the expectation was that once completed, the Village would be able to handle up to 100 patients.²³ By 1903, all 76 available beds were filled and 200 people were on the waiting list due to a lack of sufficient funds to construct new cottages.²⁴

The New Jersey State Village for Epileptics began an extensive program of land acquisition and construction during the first decade of the twentieth century. The James Van Zandt Farmstead on the west side of Belle

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number <u>8</u> Page <u>5</u> Maplewood, Somerset County, New Jersey

Mead - Blawenburg Road was purchased in 1905, bringing the Village's total area to 779 acres of fertile agricultural land. The Van Zandt house, constructed in 1860, was converted to serve as the Village's new Administration Building and Steward's residence. From that time onward, and for the duration of the Village's existence, Maplewood was used solely as the Superintendent's Residence.

The Village was expanded over time with the purchase of two additional adjacent farmsteads to the north that gave the State control of all the land bounded by Rock Brook, Burnt Hill Road, Skillman Road and Belle Mead - Blawenburg Road. New construction during this period included seven large brick patients' cottages, an "Industrial Building," a laundry, and an assembly building, many of which were constructed by the patients. The original colony concept called for small, inexpensive buildings to house small numbers of patients in a homelike setting. The pressure to rapidly admit people with epilepsy to the Village who remained in other institutions, however, made large wards preferable. As a result, the cottage plan was abandoned and large brick wards erected instead.²⁵ The expense of upkeep of such a large facility provided patients with ample opportunity to undertake productive activities. In addition to construction work, adult patients farmed the land, worked in the laundry, as housekeepers, groundskeepers, waitresses and as kitchen helpers. Patients who were children attended school at the Village. As reported in 1912, "about 50 per cent. of those admitted are able to do work of a remunerative kind; 25 per cent. are able to do housework only; while the remainder nothing at all. All of the housework, with the exception of cooking, is done by the patients under the supervision of the attendants."²⁶ Occupational and recreational therapies and socializing also passed the time. Elaborate annual pageants required the inclusion of many patients to produce and perform. Entries in County and State fairs provided patients with goals each year. Village entrants often dominated the winners' circles at the fairs, proudly entering their farm produce and occupational therapy projects in the competitions.

Building construction expanded considerably during the decades leading up to the Great Depression in order to provide care to a growing epileptic population. The Village reached its largest size of 1,100 acres in 1922 with the acquisition of a sixth farmstead. At that time there were just 54 buildings, nineteen of which were patient dormitories.²⁷ Ninety-one buildings were in place by 1926, and by 1933 that number had risen to 113.²⁸ The rate of construction rose steadily in conjunction with the growing number of patients. The average number of patients 1899-1903 was just 43; In the following five-year period, that number had risen to 183. The average number of patients continued to climb: during 1909-1913 the average population was 347; during 1914-1918 it was 618; during 1919-1923 it was 732; and, during 1924-1928 it was 879.²⁹ In the late 1920s through the 1930s, the Village was overcrowded due to increased admissions. As a result of the Great Depression, families who had cared for relatives with epilepsy could no longer afford to do so. The average patient census peaked in 1939 at 1,543.³⁰ The peak patient population in any one year was 1,600 in 1947.³¹ This increase in admissions was typical of all types of institutions during this time. Construction continued to keep pace with admissions and by 1950, there were 141 buildings on 1,080 acres.³²

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number <u>8</u> Page <u>6</u> Maplewood, Somerset County, New Jersey

In response to the overcrowding, in 1935 Village patients with few seizures who had families to care for them were granted three-month furloughs. The plan assumed that some of the people with epilepsy would adjust well to life outside the Village, be able to work, and not return to the Village. If they did return, their furlough had allowed for another patient to be at the Village during his or her absence. The plan was a success and the number of parolees rose from 26 in 1935 to 66 the following year.³³ This trend continued into World War II, and beyond, when many patients were allowed to seek employment outside of the institution. An average of 119 patients were paroled each year during the 1940s.³⁴ These successes prompted the creation of vocational training classes in 1948 which provided patients with the skills to work outside the Village. Business classes such as typing, stenography and dressmaking were among the offerings.³⁵

During the first half of the twentieth century, doctors at the Village undertook limited research to reduce the severity and frequency of seizures. In 1910 the first psychological research laboratory within an institution for people with epilepsy in the United States was established within the Village. This facility was also the first state-supported psychological laboratory in New Jersey.³⁶ Although unsuccessful here, research on epilepsy was successful elsewhere. Drugs were developed to control seizures and allow for improved quality of life. The development of psychological and biological therapies, including psychotropic drugs to control mental illness, played a major role in the treatment of epilepsy. Drug therapy, in particular, had the greatest effect on the everyday life of people with epilepsy. Luminal (phenobarbital), Mesantoin (methol phenylethylhydantoin), and Dilantin (sodium diphenyl hydantoinate) were among the principal drugs used to control epileptic seizures. Research on the effects of Dilantin on a select group of patients was undertaken at the Village in 1938. Given the improvement in a number of cases, Dilantin soon became a standard therapeutic at the institution.³⁷ These drugs allowed people with epilepsy reasonable control of their seizures for the first time.

Changes in thinking about epilepsy during the mid-twentieth century are exemplified in the literature of the time. Epilepsy and insanity were no longer believed to by synonymous; people with epilepsy were found to be of normal intelligence, and total isolation of people with epilepsy from their families was no longer recommended. A 1946 article on epilepsy dispelled the notion of an "epileptic personality," stating that "seizures are controlled by new medicines so that epileptic persons work regularly."³⁸

In spite of the progress made in de-institutionalizing patients as a result of paroles and drug therapy, those that remained at the Village (usually those with disabilities in addition to epilepsy) were subjected to everdecreasing funding for facilities and staff. A 1930s account of a visit to the village by the superintendent of another state institution describes the situation: "A tour of the buildings and cottages [of Skillman], the permanent home for innumerable patients..., each case more deplorable than the other, was my first shocking realization of the problems of the Department [of Charities and Corrections].' A visit to its dining quarters sent him, he said, 'home to his family counting my blessings but shunning the dinner table."³⁹ The prolonged state of disrepair that resulted from ongoing neglect by the State put the Village in a desperate

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number 8 Page 7

Maplewood, Somerset County, New Jersey

situation. With nowhere else to turn, in 1949 Superintendent Diomedes Gertin invited the press to visit the Village in hopes of prodding the State to correct the wretched conditions. The descriptions included references to the Village as "New Jersey's most tragic institution," and "the snake-pit of New Jersey."⁴⁰

The desperate action paid off and a study was conducted in 1951 to determine the best treatment for patients. One of the study's conclusions was the recommendation that the facility be reorganized, noting that several other states had either abandoned or restructured epilepsy institutions. The core issue was that the need for custodial care of people with epilepsy was minimal given the advances made in drug therapy and treatment in the prior decade. The end result was the establishment of the New Jersey Neuropsychiatric Institute in 1953. The New Jersey State Village for Epileptics, as originally envisioned, would no longer exist.

The reorganized facility had an expanded charge. The Institute was not intended to be custodial in nature like its predecessor, but was instead designed as a research facility seeking treatments for the various conditions included among its expanded responsibilities. The facility's now-limited role in the treatment of epilepsy was the remaining custodial care of people with epilepsy who could not return to the community (approximately 750)⁴¹ and the provision of out-patient assessment of people with convulsive disorders. The New Jersey Consultation Service for Convulsive Disorders, which operated clinics throughout the state, was also based at the Institute. The Institute also provided for emotionally-disturbed children, people with acute psychiatric disorders, and individuals with drug addiction and alcoholism. The farming activities that had sustained the Village were also phased out.

The Institute's mission was changed in 1976 when the facility was reorganized under the Division of Mental Retardation to serve people with developmental disabilities, neurological disorders, and cerebral palsy. The facility was renamed the North Princeton Developmental Center in 1983. The Center closed in April 1998 in response to the trend toward placement of individuals in community-based group homes. The New Jersey Department of Human Services is seeking to sell the entire property to a non-governmental organization or corporation.

Maplewood is one of the largest Greek Revival dwellings in the region and is representative of the prominence of the Voorhees family during the mid-nineteenth century. The building's unusually-large seven bays and high style interior finishes indicate a family of prominence and affluence. The cornice treatment, the rectangular kneewall windows, the sidelights, and the interior treatments -- especially the door surrounds -- are all fine examples of Greek Revival design. All of these elements remain untouched. Although they are later additions, the north and south porches are in keeping with the original design intent and reflect the penchant for classical forms in the early years of the twentieth century. The dramatic tree-lined drive depicted in Snell (1881) also remains, providing a setting very much like the one the Voorhees family created for themselves. The building and property retain a high level of integrity of location, design, setting, materials, workmanship, feeling and association.

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number <u>8</u> Page <u>8</u> Maplewood, Somerset County, New Jersey

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13. Charles P. Jubenville, "A History of the New Jersey State Village for Epileptics" (Ed.D. Thesis, Rutgers University, 1957), 2, 183.

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NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number <u>8</u> Page <u>9</u> Maplewood, Somerset County, New Jersey

15. Walter C. Baker, "A History of the New Jersey State Village for Epileptics" (Unpublished paper written for Van Harlingen Historical Society, Belle Mead, N.J., 1993), 24.

16. Jubenville, "A History," 88.

17. Ibid., 43, citing news item in the Daily True-American, January 31, 1896.

18. First Annual Report, 8-9.

19. Ibid., 10-12. Second Annual Report, 8-9,13.

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26. Weeks, "What New Jersey Is Doing...," 7.

27. Fitzgerald (1922), 99.

28. Fitzgerald (1926), 96-97. Fitzgerald (1933), 93-94.

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31. Michael Mendelson, M.D., "A History of the New Jersey Neuropsychiatric Institute" (Unpublished paper written for New Jersey Neuropsychiatric Institute, Skillman, N.J., 1972), 5.

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NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number <u>8</u> Page <u>10</u> Maplewood, Somerset County, New Jersey

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38. Ibid., 95, citing Jerry C. Price, "Epilepsy, What can be done about it?," *Trained Nurse and Hospital Review* CXVI (July, 1946), 18.

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40. Baker, "A History," 25.

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NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number 9 Page 1

Maplewood, Somerset County, N.J.

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NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number 9 Page 2 Maplewood, Somerset County, N.J.

<u>Maps</u>

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Section number 9 Page 3 Maplewood, Somerset County, N.J.

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NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number 10 Page 1 Ma

Maplewood, Somerset County, New Jersey

VERBAL BOUNDARY DESCRIPTION

The building is located within Block 26001, Lot 1 in Montgomery Township, Somerset County, New Jersey. The boundary is defined by appropriate lines of convenience. The southern boundary begins on the south side of Burnt Hill Road along Bedens Brook approximately 425 feet east of the drive and runs west along the south side of the road along a line of convenience following the same course approximately 600 feet to the north bank of Bedens Brook. The western boundary runs north from this point along a line of convenience 500 feet to an east-west drive located north of the house (Maplewood Drive). The northern boundary runs east from this point along Maplewood Drive and a line of convenience 600 feet. The eastern boundary runs south from this latter point along a line of convenience 500 feet to the southern boundary.

BOUNDARY JUSTIFICATION

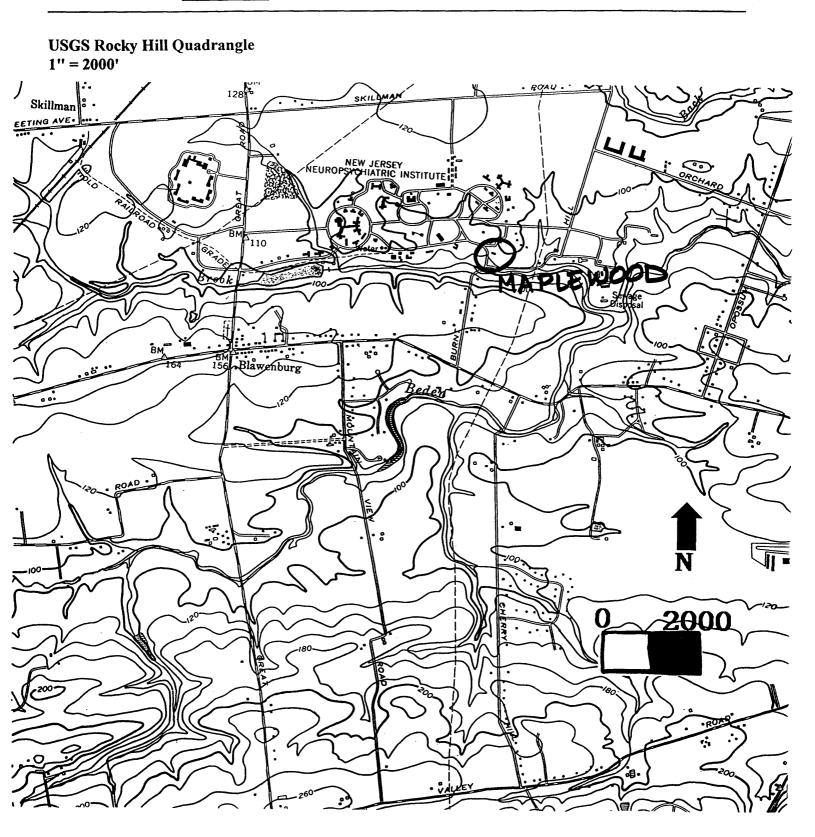
The nominated property encompasses the historic boundaries of the yard surrounding the house, as defined by specimen plantings and other landscape features. The parameters of the yard are partially visible in the 1881 Snell rendering. The western boundary includes the low, stone wall on the western edge of the drive where Burnt Hill Road crosses the brook and the tree-lined drive. The boundary is formed by a water treatment field immediately west of the outbuildings. The northern boundary defined by Maplewood Drive serves as the dividing line between the residence and the remainder of the institution. The eastern boundary is formed by mature trees that separate the building from a row of 1960s-1970s residences constructed for the institution's physicians. The southern boundary is Burnt Hill Road, as defined in the 1898 deed.

OMB No. 1024-0018

United States Department of the Interior National Park Service

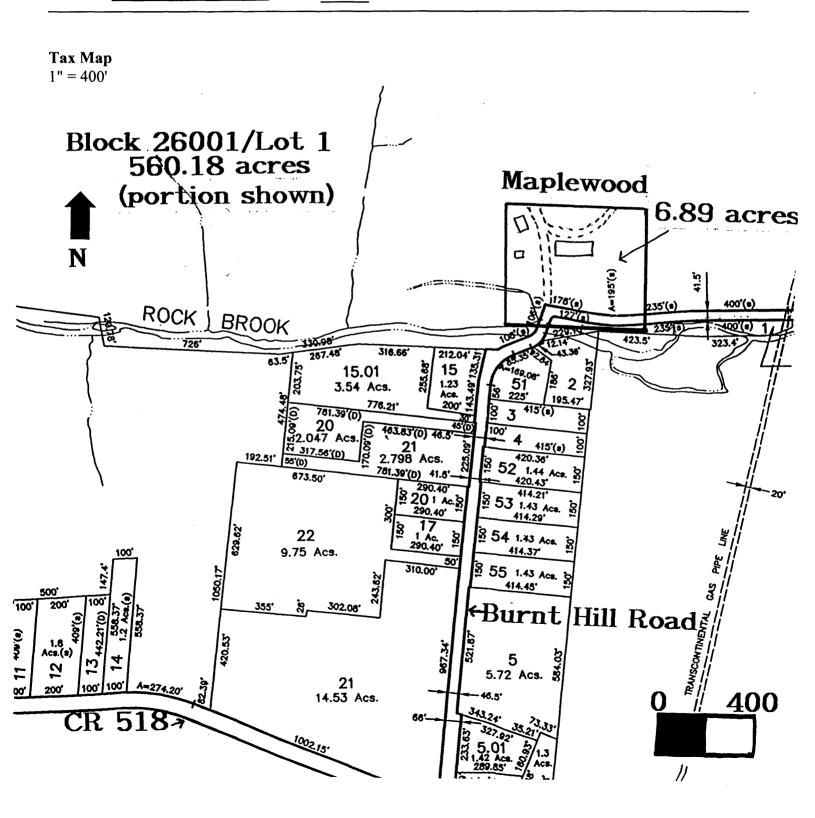
NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number _____ Page ____ Maplewood, Somerset County, New Jersey



NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section Additional Information Page 1 Maplewood, Somerset County, New Jersey

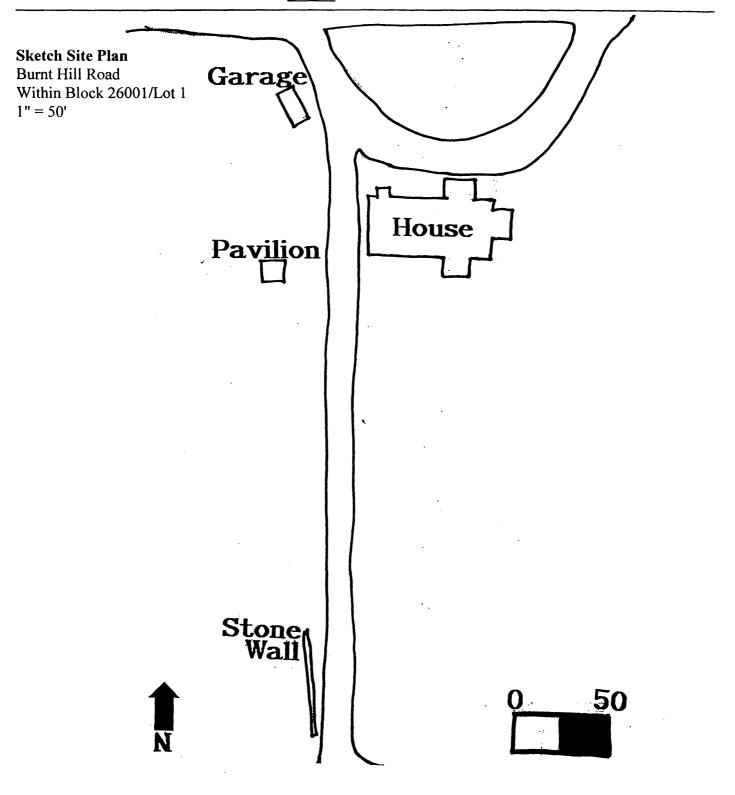


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NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

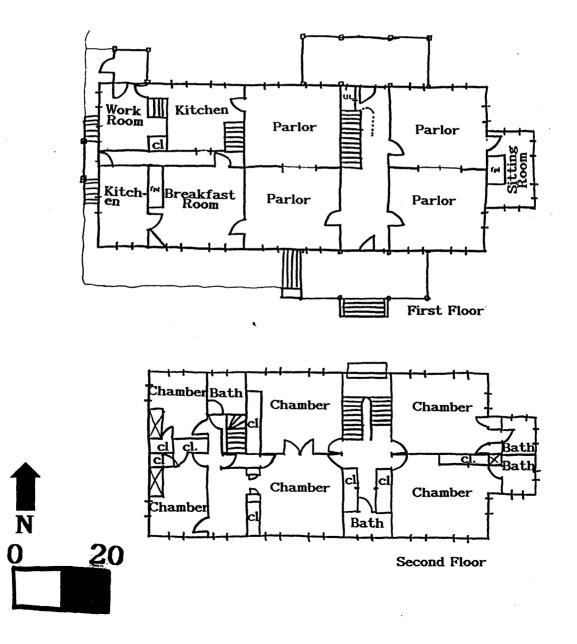
Section Additional Information Page 2 Maplewood, Somerset County, New Jersey



NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section Additional Information Page 3 Maplewood, Somerset County, New Jersey

First Floor and Second Floor Plan 1" = 20'



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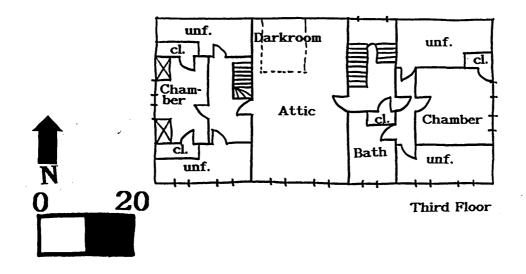
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United States Department of the Interior National Park Service

NATIONAL REGISTER OF HISTORIC PLACES **CONTINUATION SHEET**

Section Additional Information Page 4 Maplewood, Somerset County, New Jersey

Third Floor Plan 1" = 20'



NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section Additional Information Page 5 Maplewood, Somerset County, New Jersey

Newspaper article from the *New York Herald*, dated November 2, 1898, depicting Maplewood. New Jersey State Archives, Record Group: Department of Institutions and Agencies, Subgroup: NJ State Village for Epileptics, Series: Photographs, Box: 28, Newspaper Scrapbook.



LITTLE RESTRAINT ON FATINATE. Eventually there will be a community enleptics, with their own officers and loc customs. No restraint forther than atte dates to help the patients'in trace of necessit will be imposed. In time a limited number will be allowed to have their wives and chi dren with them.

dreb with them. Dr. Coursen, of Vineland, has been a pointed superintendent of the village. A was formerly supervisor of the state far for the feelbe Minded, in Vineland.

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NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section Additional Information Page 6 Maplewood, Somerset County, New Jersey

Ca. 1910 postcards in the collection of the University of Medicine and Dentistry of New Jersey Library, Newark.



"Maplewood," Superintendent's Residence The

New Jersey State Village for Epileptics at Skillman

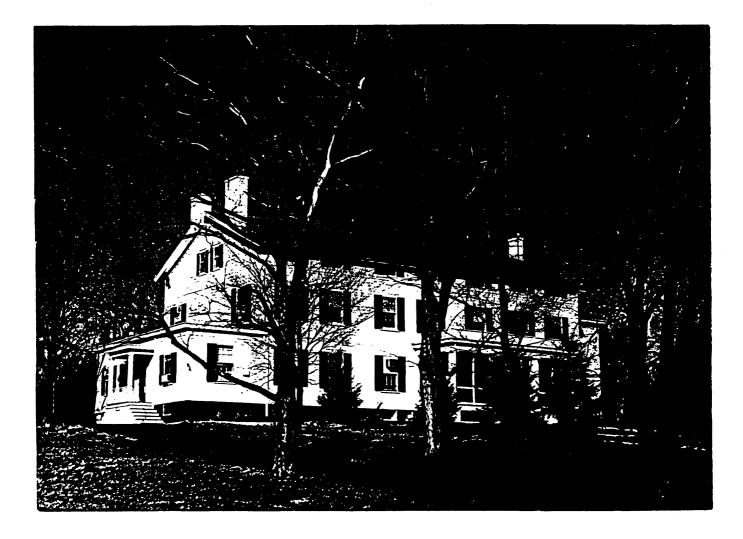


"Maplewood." Superintendent's Residence The New Jersey State Village for Epileptics at Skillman

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section Additional Information Page 7 Maplewood, Somerset County, New Jersey

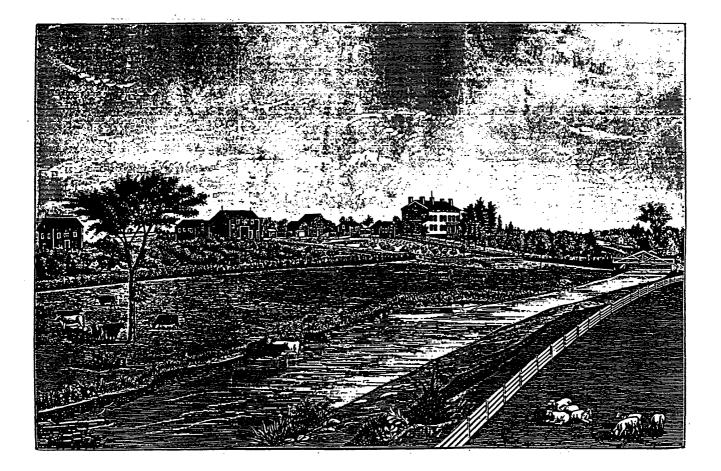
Undated (ca. 1972) photograph. New Jersey State Archives, Record Group: Department of Institutions and Agencies, Subgroup: NJ State Village for Epileptics, Series: Photographs, Box: 27.



NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section Additional Information Page 8 Maplewood, Somerset County, New Jersey

Ca. 1881 Plate from Snell, History of Hunterdon and Somerset Counties.



NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number Photographs Page 1 Maplewood, Somerset County, New Jersey

PHOTOGRAPHS

For all photographs: Property Name: Maplewood

Property Location: Montgomery Township, Somerset County, New Jersey

Photographer: Stacy E. Spies

Location ofOffice of Stacy E. Spies, Architectural HistorianNegatives:407 Warren StreetScotch Plains, NJ 07076-1920

Photograph No. 1 of 16:

View: North and east elevations, looking southeast. Date: November, 1999

Photograph No. 2 of 16:

View: Drive to house leading from Burnt Hill Road, looking north. Date: November, 1999

Photograph No. 3 of 16:

View: South elevation of house from Burnt Hill Road, looking north. Date: November, 1999

Photograph No. 4 of 16:

View: Foundation at southwest corner, looking northwest. Note keyed brick and ashlar foundation. Date: August, 1999

Photograph No. 5 of 16:

View: South elevation (partial), looking north. Date: November, 1999

Photograph No. 6 of 16:

View: North porch and entrance, looking south. Date: August, 1999

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number Photographs Page 2 Maplewood, Somerset County, New Jersey

Photograph No. 7 of 16: View: Main hall, looking south. Entrances to parlors at left and right. Date: August, 1999
Photograph No. 8 of 16:

View: Main hall, looking north. Date: August, 1999

Photograph No. 9 of 16:

View: Typical Greek Revival moldings located throughout the house.

Date: August, 1999

Photograph No. 10 of 16:

View: Fireplace in first floor sitting room, looking southwest. Date: August, 1999

Photograph No. 11 of 16:

View: Southwest dining room, looking west. South kitchen visible through doorway. Date: August, 1999

Photograph No. 12 of 16:

View: Main stair from second floor, looking north. Date: August, 1999

Photograph No. 13 of 16:

View: Room 201, showing typical chamber finishes, looking northeast. Bathroom 202 visible through doorway
 Date: August, 1999

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Photograph No. 14 of 16:

View: Room 301, showing typical chamber finishes, looking northeast.

Date: August, 1999

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number Photographs Page ____ Maplewood, Somerset County, New Jersey

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Photograph No. 15 of 16:

View: Hall in west section of third floor, looking north. Date: August, 1999

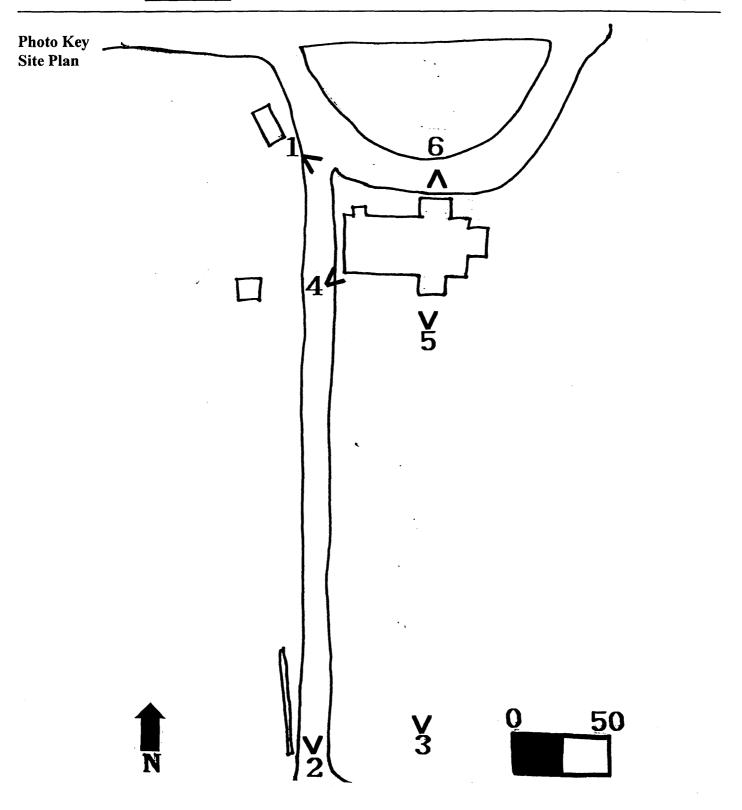
Photograph No. 16 of 16:

View: Unfinished Room 302, looking south. Date: August, 1999

7

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

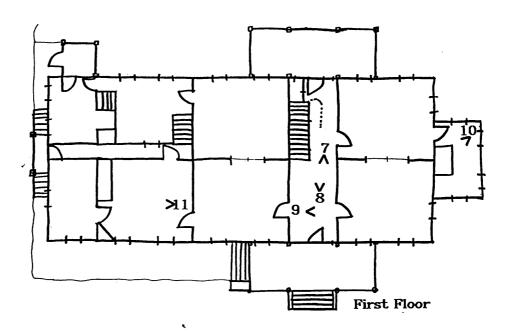
Section number Photographs Page _ 4 _ Maplewood, Somerset County, New Jersey

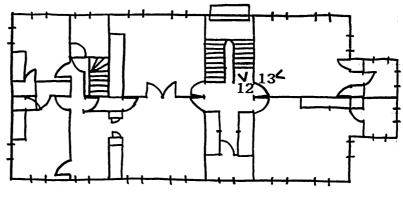


NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number Photographs Page 5___ Maplewood, Somerset County, New Jersey

Photo Key First and Second Floors



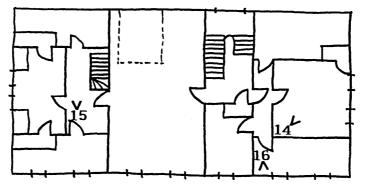


Second Floor

NATIONAL REGISTER OF HISTORIC PLACES CONTINUATION SHEET

Section number Photographs Page ____ Maplewood, Somerset County, New Jersey

Photo Key Third Floor



Third Floor

