

United States Department of the Interior
National Park Service

National Register of Historic Places Registration Form

This form is for use in nominating or requesting determinations of eligibility for individual properties or districts. See instructions in *Guidelines for Completing National Register Forms* (National Register Bulletin 16). Complete each item by marking "x" in the appropriate box or by entering the requested information. If an item does not apply to the property being documented, enter "N/A" for "not applicable." For functions, styles, materials, and areas of significance, enter only the categories and subcategories listed in the instructions. For additional space use continuation sheets (Form 10-900a). Type all entries.

1. Name of Property

historic name Hudson River State Hospital, Main Building
other names/site number Hudson River State Hospital for the Insane, Main Building
Hudson River Psychiatric Center, Main Building

2. Location

street & number Route 9 not for publication
city, town Poughkeepsie vicinity
state New York code NY county Dutchess code 027 zip code 12601

3. Classification

| | | | |
|--|---|-------------------------------------|---------------------|
| Ownership of Property | Category of Property | Number of Resources within Property | |
| <input type="checkbox"/> private | <input checked="" type="checkbox"/> building(s) | Contributing | Noncontributing |
| <input type="checkbox"/> public-local | <input type="checkbox"/> district | <u>1</u> | <u>10</u> buildings |
| <input checked="" type="checkbox"/> public-State | <input type="checkbox"/> site | _____ | _____ sites |
| <input type="checkbox"/> public-Federal | <input type="checkbox"/> structure | _____ | _____ structures |
| | <input type="checkbox"/> object | _____ | _____ objects |
| | | <u>1</u> | <u>10</u> Total |

Name of related multiple property listing:
N/A

Number of contributing resources previously listed in the National Register 1

4. State/Federal Agency Certification

As the designated authority under the National Historic Preservation Act of 1966, as amended, I hereby certify that this nomination request for determination of eligibility meets the documentation standards for registering properties in the National Register of Historic Places and meets the procedural and professional requirements set forth in 36 CFR Part 60. In my opinion, the property meets does not meet the National Register criteria. See continuation sheet.

Signature of certifying official Date

State or Federal agency and bureau

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

Signature of commenting or other official Date

State or Federal agency and bureau

5. National Park Service Certification

I, hereby, certify that this property is:

entered in the National Register.
 See continuation sheet.

determined eligible for the National Register. See continuation sheet.

determined not eligible for the National Register.

removed from the National Register.

other, (explain:) _____

Signature of the Keeper

Date of Action

6. Function or Use

Historic Functions (enter categories from instructions)

Health Care

Current Functions (enter categories from instructions)

mental hospital

7. Description

Architectural Classification
(enter categories from instructions)High Victorian Gothic

Materials (enter categories from instructions)

foundation sandstonewalls brick

roof slate shinglesother

Describe present and historic physical appearance.

This hospital complex is located on the east bank of the Hudson River about one mile north of Poughkeepsie. In 1867, 200 acres of land that had been a farm overlooking the Hudson River, and belonging to James Roosevelt, were purchased for \$80,680 by the City of Poughkeepsie and the County of Dutchess and given to the State for the establishment of a "rightly equipped and constructed hospital for the mentally ill."

The following description is extracted from the First Annual Report in 1868:

The hospital was planned to accommodate about 200 patients of each sex; the wards for men constituting the entire wing to the south and wards for women, the entire wing to the north of the central building. The chapel was placed between the wings and in the rear of the central building. The kitchen and general services department was located in the rear of the chapel.

The department for each sex consisted of four wards on the principal floor, four wards on the second floor, and one ward on the third floor. Each ward was furnished with a hall and fire-proof staircase on the front line of the building and roads of approach are intended to give separate access to the entrance hall to every ward. Open spaces are left in the center of the front line of each section for light and circulation of air. These spaces, marked "OMBRA" on the plans, are intended to be used by patients in mild weather for open air exercise.

Each wing is connected with the central building through a one-story corridor, to which a conservatory or plant cabinet is attached. It is intended that this structure be furnished with shrubs and plants of a somewhat hardy character, so as to present at this available point a pleasant general effect to patients and visitors. It is thought to be a matter of considerable importance that first impression of the main entrance to the building be cheerful. The first base stones were laid on the 17th of September, 1867; the masonry on the 25th of September, 1867.¹

8. Statement of Significance

Certifying official has considered the significance of this property in relation to other properties:

nationally statewide locally

Applicable National Register Criteria A B C D NHL #4

Criteria Considerations (Exceptions) A B C D E F G

Areas of Significance (enter categories from instructions)

Architecture

Period of Significance

Significant Dates

1867, 1870,
1871, 1886

Cultural Affiliation

Significant Person

Architect/Builder

Withers, Frederick Clarke
Vaux, Calvert
Olmsted, Frederick Law

State significance of property, and justify criteria, criteria considerations, and areas and periods of significance noted above.

The Hudson River Hospital is the first significant example in the United States of the High Victorian Gothic style applied to institutional construction. Designed by Frederick C. Withers, who was primarily known for his ecclesiastical building, it represents the culmination of the Gothic Revival, and was a mature work that established Withers' reputation as one of its finest practitioners. The hospital also represents the talents of one of America's greatest landscape architects, Frederick Law Olmsted. One of a number of hospitals developed as the result of recognizing insanity as a mental illness, this large complex, when it opened, was considered the most modern facility yet built in New York State.

In 1868, a committee that was formed to examine the problem of housing the insane reported:

The poor houses throughout the State were generally badly constructed, ill managed, ill warmed, ill ventilated. In Dutchess County, the rooms were crowded with inmates, the air, particularly in the sleeping apartment, was very noxious and to the casual visitor, almost insufferable. The Superintendent of the Poor, in his letter of January 9, 1867, argued for hospitals where the insane could receive prompt and appropriate treatment.¹

The response to this request was to locate a facility centrally that would meet the standard established by Dr. Thomas Kirkbride of Philadelphia in his 1854 publication on the subject of treatment of the insane:

The system Dr. Kirkbride described was for a state hospital for no more than 250 patients, "this number being now almost universally conceded to be as many as should be collected in any one institution." Perhaps the dominant characteristic of the plan, and the one that has most persisted, was its linear arrangement: a center section for administrative and other activities, with wings for patients extending on each side.

9. Major Bibliographical References

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

Primary location of additional data:

- State historic preservation office
- Other State agency
- Federal agency
- Local government
- University
- Other

Specify repository:

New York State Archives

10. Geographical Data

Acreage of property approximately 10 acres

UTM References

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Zone Easting Northing

C 1 8 5 8 9 3 1 0 4 6 2 0 2 4 0

B 1 8 5 8 9 2 9 0 4 6 2 0 6 2 0
Zone Easting Northing

D 1 8 5 8 8 8 8 0 4 6 2 0 2 0 0

See continuation sheet

Verbal Boundary Description

See continuation sheet

Boundary Justification

The boundary includes the original building and small buildings near it. The open land across Hudson View Drive, which has been used historically as open space by the patients, is also included.

See continuation sheet

11. Form Prepared By

name/title Carolyn Pitts, Historian

organization History Division, NPS date 2/9/89

street & number 1100 L Street, NW telephone (202) 343-8166

city or town Washington state DC zip code 20013

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In the Second Annual Report of November 30, 1868, reference is made to building resumed, but it was carried on slowly because of a strike of the bricklayers.

The bricklayers unexpectedly refused to continue at work when "non-society" men were excluded. By the end of November, all the brickwork of the main section was completed, except the temporary walls and chimney. The second section was erected. This structure stands at right angles with the first section and adjoins it on the east. It extends 312 feet and is from north to south, 25 feet wide, with several projections. It has a linear circumference of 900 feet, and is two stories high with one staircase that rises a story higher.

In 1870 a third section, 175 feet long, was erected. This building is connected with the western half of the first section. For one-quarter of its length it is three stories high; the rest of it having two stories. The fourth and last section of the hospital was three stories high in every point and is much larger than any one of the sections now up. It is planned for the reception and treatment of 125 patients. It will be connected to the central kitchen.

In each hospital wing three engaged towers rise slightly above the main roof, and give entrance to the building. ...

Bricks of excellent quality and laid in the best manner constituted the wallface. Between the plain, modest cornice and the water-table, both of light-tinted sandstone, are several narrow band-courses of the same material. The door-heads and window-heads are also composed of this stone, with dark bluestone ashlar sections interposed. The stones in the door-heads and window-heads are, for the most part, flush with the wallface -- an integral and connected portion of the solid structure.²

The most distinguishing feature of the main building is the polychromatic exterior finish. Materials of differing colors and textures were juxtaposed, creating decorative bands, highlighting corners, arches and arcades. Ornamental pressed bricks and stone were also used to decorate wall surfaces. Straight-headed openings were used in addition to traditional Gothic (pointed-arch) windows and doors. Small granite columns support the arched porch that leads to the entrance of the building. The capitals of the columns are of the Corinthian order, with small volutes called caulicoli. The entablature enrichments and mouldings include dentils along the projecting cornice. The wings of the building have many pyramidal roofs.

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In the greater part of the basement, cast-iron girders were used over the openings; in similar positions in the building, brick arches were tied, when necessary, with wrought iron bars. In place of cast-iron girders over the bay windows, rolled-iron beams 15 inches high have been used in combination with a brick arch. Light rolled-beams have been procured with other materials for fire-proof floors in the entrance tower, as well as a part of the iron for the staircase. Iron frames have been made and set for fire-proof doors, separating the wards from the staircase.

A style of window guard has been adopted for the lower sash which will afford security and at the same time, be devoid of a prison-like appearance. ... The upper window sash will be of iron and will be stationary. These materials were obtained from England through a New York house.

The iron work is displayed in the ornamental railings on the roof, the conductors for lighting, the gaspipe laid and especially, the iron sashes and window guards. The window guards are made in the strongest manner, and of the best wrought and malleable iron. ... Iron treads have been placed on all the stairways. ...

The interior is plain. Every member and feature wears the aspect of utility, of safety and durability. ... An effort has been made to make the apartments of the hospital light, cheerful and homelike to create a happy and restorative influence.

Spruce timber, in sizes to suit, had been cut to order in Maine. The lumber for bridge flooring, scaffold planks, attic floor and roof of the hospital building was obtained from Albany, also a large quantity of thoroughly seasoned oak and Norway pine plank. The best of the pine was used alternately with oak for the floors of the hospital. ...

Each ward is furnished with a hall. For the sake of economy the bedrooms are placed on both sides of a corridor. Open spaces are left in the center of the front line of each section for light and circulation of air. In the wards containing bedrooms on both sides of a corridor, the living room, lavatory, etc., are arranged on one side only of a separate corridor that runs at right angles to a bedroom section. Each ward in addition to its dormitory, is provided with a living room of large dimensions, having windows on three sides of it; a dining room, with pantry attached, communicating by lifts with the basement corridor, and connecting with the service department; a lavatory, a room in which a patient may be thoroughly washed from head to foot, either in a sitting or a standing position, the whole floor and the sides of the room for six inches in

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height being made water-tight and filled with a wash-pipe; a bath room with a bath placed in the center of the apartment, and with screened dressing space attached; a room containing water-closets and urinals; a linen and clothes room; and a dirty linen shaft large enough to be used for hoist-away purposes.

In each wing a cold air shaft, running under the principal floor and connected with the fan-room, is arranged to carry fresh cold air by means of a separate flue to every room in every ward, and in winter, steam heat is intended to be applied on the basement level at the points of junction at which the vertical flues branch from the general horizontal air shaft. Ventilating flues are provided for the different apartments, and terminate in chimneys or under the ridged roofs.³

Today the main building in particular retains its High Victorian Gothic finish. There are stairs of oak, marble fireplaces, and Minton tile floors in the vestibule.

The grounds were developed by Calvert Vaux and Frederick Law Olmsted.

There are 10 ancillary buildings in the vicinity of the main building. (See site plan.) Although they are included in the boundary, and are associated with the Main Building, they are non-contributing.

They are: (as enumerated on the Hospital Site plan):

- 36. Bus Terminal building
- 40. Plant facilities
- 41. Firehouse-recreation offices
- 42. Blacksmith shop
- 43. Carpenter and machine shop
- 44. Outdoor Pavilion
- 45. Mortuary and Laboratory
- 46. Outdoor Pavilion
- 50. Laundry and Tailor shop
- 166. Refreshment stand

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Footnotes:

1. First Annual Report of the Board of Managers of the Hudson River Hospital for the Insane (Albany: State of New York, 1868), pp. 8-11.
2. Second Annual Report of the Board of Managers of the Hudson River Hospital for the Insane (Albany: State of New York, 1869), pp. 10-13.
3. Third Annual Report of the Board of Managers of the Hudson River Hospital for the Insane (Albany: State of New York, 1870), pp. 8-10.

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The plan called for three sets of wings, each probably about 140 feet long. To provide maximum light, ventilation, and privacy, they were to be joined to the center section and to one another by a connecting section with tall windows, and each wing was to be set back from the preceding one.

The building would be three stories high with a full basement.

The center section would house kitchens, storerooms, certain offices, reception and visiting rooms, a lecture room and chapel, and apartments for the superintendent and his family (if he chose to live in the building) and for various other staff members. The wings were to have separate wards for eight classes of patients of each sex -- thus an average of a little over 15 patients in each of the 16 wards with the men's wards on one side of the center section and the women's on the other. The least excited patients would occupy the wings nearest the center, and the most disturbed would be farthest away.

The wards themselves were fairly self-contained. Each was to have a parlor (about 20 feet square), a dining room, a clothes room, bathroom, and water closet. Most patients would have single rooms. Dr. Kirkbride warned against making those rooms large enough for two patient occupation; he advised that 9 by 11 ft. was the best size.

Each ward would also have a dormitory for four to six patients, and one or two rooms large enough for a patient with a special attendant. The rooms would be arranged along both sides of a corridor not less than 12 feet wide and 12 feet high. On each side of the building's center section--that is, for each sex--there would be at least one infirmary, two workrooms, storerooms, and drying closets.

Dr. Kirkbride went into detail about such matters as construction materials (he was concerned that the building be as fireproof as possible), doors, windows, & window guards, water closets, kitchens, and ventilation and indirect heating (including the arrangement of the boilers and the sizes and materials for pipes and flues). His discussions reflect his awareness that costs should be held down, but he also warned that the best kind of hospital was sure to be the most economical in the end--for true economy consists, not only in avoiding all waste and extravagance, but also in doing thoroughly whatever is undertaken.

Almost equally detailed attention was given to the grounds; it is now well established that this class of hospitals should always be located in the country, and surrounded by varied and attractive scenery. Every hospital should have at least 100 acres of land to allow adequate light and air.²

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The local competition to build and operate such a facility fell between Poughkeepsie and Newburgh. The Poughkeepsie site belonging to James Roosevelt fronted on the Hudson River, and was accessible by river and railway. Added to the original 206 acres was the farm of William Davies, which was approximately 84 acres. This made an excellent site for the institution. The architect was selected unanimously by the Hospital Committee: Messrs. Vaux, Withers and Company. On August 9, 1867, the plans, elevations, specifications and estimates were approved and work began in 1868 with the laying of the cornerstone. The first seven patients were admitted on October 20, 1871; in 1872, 60 patients were admitted; and by 1890 there were 900 patients. By 1950, 6,000 patients were in residence. There were several additions, one in 1870 and others in 1871 and 1886.

By action of the committee on plans, Messrs. Olmsted, Vaux and Co. were directed to prepare for the improvement of the grounds.

Mr. Samuel D. Backus, an accomplished engineer and architect, was engaged to make a topographical survey. Mr. Backus was appointed engineer of the works, under the direction of the medical superintendent.

A description of the site in 1870 follows:

The hospital property is situated on the east bank of the Hudson River, and is about one mile from the city of Poughkeepsie, and two miles from the railway station. The estate comprises about three hundred acres. The site of the building is a plateau, one hundred and eighty-six feet above tide water, and twenty five hundred feet distant from the river. This elevated plateau contains twenty-five acres, and has the contour of an irregular parallelogram, its shortest diameter being from east to the west, and averaging six hundred feet, while the long diameter is about eighteen hundred feet. The formation, geological, is gravel, traversed at intervals by deep veins of sand, entirely free from organic matter. On every side the ground slopes rapidly, and is admirably adapted to drainage. In natural scenery the site is probably unsurpassed by any other point on the Hudson. The grounds in the rear of the hospital constitute nearly two-thirds of the estate. They are perfectly retired, being neither approached nor overlooked by any public roads, and afford ample space for exercise and garden purposes.³

Frederick Clarke Withers (1828-1901) was at the height of his fame when he was selected as architect of the Asylum. It certainly helped that his close friend, General Joseph Howland, was on the Hospital's Board of Managers and was also New York State Treasurer. Withers was one of the skilled young Englishmen who immigrated to America in the 1850's. He was in close touch with his compatriots Calvert Vaux and Jacob Wray Mould. After settling in Newburgh, New York, and

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working with Andrew Jackson Downing and Calvert Vaux, he went to New York City with Vaux and became a partner of Vaux and Olmsted in 1864 where they worked on plans for Central Park. Serving as an engineer during the Civil War, Withers was wounded and returned home to practice in 1862. Known primarily as a church and institutional architect, he also served as architect of the Department of Correction in New York City, for which he designed the Jefferson Market Police Court and Prison and the Chapel of the Good Shepherd on Welfare Island. He was also the architect of the Columbia Institute for the Deaf and Dumb (Gallaudet College) in Washington, D.C. Withers was particularly well known for his book Church Architecture: Plans, Elevations and Views...(1873).

The style most preferred by Withers was High Victorian, an outgrowth of the great vogue for the basically ecclesiastical Gothic imported from abroad. From the end of the Civil War to the close of the nineteenth century, the Gothic was shaped by the English author, John Ruskin, whose advocacy of all things Venetian made that city famous the world over. Ruskin also firmly believed in the moral and ethical nature of architecture and, while he rejected the cold English Decorated Gothic, he recommended the Italian polychromy in his book The Stones of Venice. This Ruskinian or High Gothic style was particularly popular in the United States:

Americans, always taken with a new idea, greeted Ruskin's writings with enthusiasm and took to building in Italian Gothic even more readily than did the English. Lacking a Gothic of their own, Americans were not troubled, as were some Englishmen, by the substitution of an alien for a national style. In the hands of gifted architects Ruskin's writings prompted the creation of a series of boldly handsome buildings that have only lately been properly valued for their conceptual grandness, richness of material, and quality of craftsmanship. Interpreted by less able practitioners, however, his precepts inspired some grim and ponderous piles of masonry upon which much of the blame must rest for the long period of prejudice against late Victorian architecture. Successful or not, these polychromed Italianate buildings form a major facet of America's High Victorian Gothic and are classified as Ruskinian in acknowledgment of the famous critic who would doubtless have found fault with them all.⁴

The first application of High Victorian Gothic to a hospital building was Withers' Hudson River hospital: the flexible plan lends itself easily to the "picturesque" profile and the lively polychromy of its red brick and blue and white stone enlivens the elevations. However, this style would soon be replaced by H.H. Richardson's brooding towers of the Buffalo State Hospital (1871).

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Richardson was to establish aesthetic building rather than philosophical historicizing--and Withers' medieval idealism would be banished by the end-of-the-century technology that would produce the skyscraper.

Specifically, Dr. Frank Kowsky has observed:

Along with the impending Romanesque Revival, the growing regard among doctors in the 1870s for decentralized or cottage-plan asylums foretold the end of Ruskinian Gothic buildings like the Hudson River Hospital. The economy and success of the contemporary Willard Asylum (1865; designed by Joseph Chapin), in Ovid, New York, which was built on the cottage system, prompted many reasonable people to question the soundness of such megalithic complexes as the Poughkeepsie hospital. In a paper read before the Conference of Boards of Public Charities in 1875, by which time the Hudson River Hospital, with over \$2,000,000 spent on its construction, had become the second most costly asylum in the country, a New York City doctor named H.B. Wilbur decried the waste of public money that asylum construction had occasioned since the close of the Civil War. He especially attacked the eastern states for having spent over \$2600 to accommodate each mental patient, while "the cost of the ten most expensive hotels in America would probably not exceed \$1500 a guest." ... Wilbur contended that huge asylums were ineffectual, for they substituted class treatment for individual attention. He noted that under the current system, "the ratio of recoveries in our asylums seems to be a diminishing one." But Wilbur's conclusion was optimistic, for with the erection of the decentralized Willard Asylum, as well as the Moses Shepherd Asylum in Towson, Maryland, designed in 1862 by Vaux while Withers served in the Union army, Wilbur was able to say that "better views are beginning to prevail." The ascendancy of these "better views" made the cumbersome plan of the Hudson River Hospital nearly obsolete by 1878.⁵

Withers was one of the finest architects working in a mid-19th-century style. He not only understood what a building required, but he used exquisite detail and color as only a scholar of Ruskin could have done. He held the high ideals of reform and sincerity and dignity as expressed in architecture as basic to the performance of his art. This is expressed vividly in the Hudson River Asylum.

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Footnotes:

1. Hospital and Community Psychiatry, 27, 1 (July 1976), 474.
2. Ibid., p. 5.
3. Ibid., p. 7.
4. Loth, Calder, and Julius Sadler, The Only Proper Style, Gothic Architecture in America (Boston: New York Graphic Society, 1975), pp. 114.
5. Report to the Conference of the Board of Public Charities (New York: The Conference..., 1875), pp. 147, as cited in Francis Kowsky, The Architecture of Frederick Clarke Withers (Middletown, Conn.: Wesleyan University Press, 1980), p. 176, n. 4.6.

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American Architecture and Building News. 3, 1867; March 30, 1878,
p. 110; August 24, 1878, p. 65.

The American Builder, 2 (April 1869): 91-92.

Dictionary of American Biography. New York: Charles Scribner's Sons,
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Harper's Weekly, February 28, 1874, pp. 194; illustration, p. 193.

Hospital and Community Psychiatry 27, 1 (July 1976): 11.

Hurd, Thomas. Institutional Care of the Insane. Baltimore: Johns Hopkins
University Press, 1919. Vol. I.

Kowsky, Francis R. The Architecture of Frederick Clarke Withers. Middletown,
Connecticut: Wesleyan University Press, 1980.

Loth, Calder, and Julius Sadler. The Only Proper Style, Gothic Architecture
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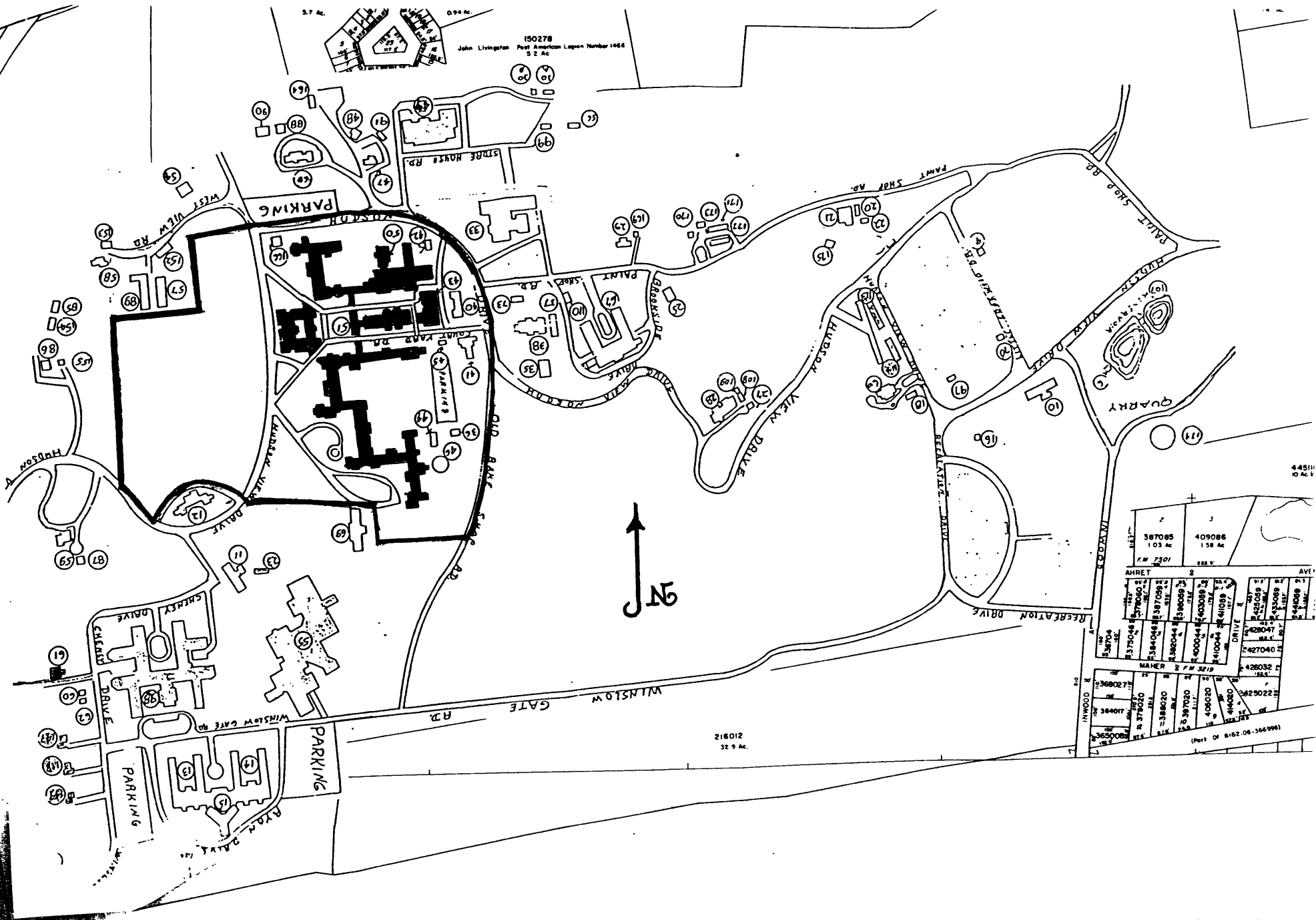
State of New York. First Annual Report of the Board of Managers of the Hudson
River Hospital for the Insane. Albany: State of New York, 1868.

Wilbur, Dr. H. B. Report to the Conference of the Boards of Public Charities,
1875. New York: The Conference..., 1875.

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Beginning at a point 200 feet south of the southern end of the main building complex and 50 feet east of the Avery Home (#69), the boundary line travels east to the West side of Old Bake Shop Road where it turns north and follows the route of Old Bake Shop Road until it meets Hudson View Drive; the boundary then follows the inside curb of Hudson View Drive as it curves around the north side of the main building and intersects with the road in front (west) of the main building (also Hudson View Drive); at the intersection, the boundary line continues in a westerly direction into the lawn area in front of the main building; at a point 50 feet east of the greenhouses (#57 and #152), it turns 90 degrees to the south to avoid the greenhouses; at a point 50 feet south of the greenhouses, the line turns 90 degrees to the west and extends within 100 feet of the outbuildings of Staff Residence #86 (#85, 154, and 155) where it turns 90 degrees to the south, travelling to where it meets the near side of Hudson View Drive as it approaches the main building; the boundary follows the road east to the driveway of Five Family Staff House 4 (#12) and then follows the driveway north to exclude the house; where the driveway rejoins Hudson View Drive, the boundary continues east across the lawn to a point 50 feet east of Avery Home, where it turns 90 degrees south and travels to the point of origin.

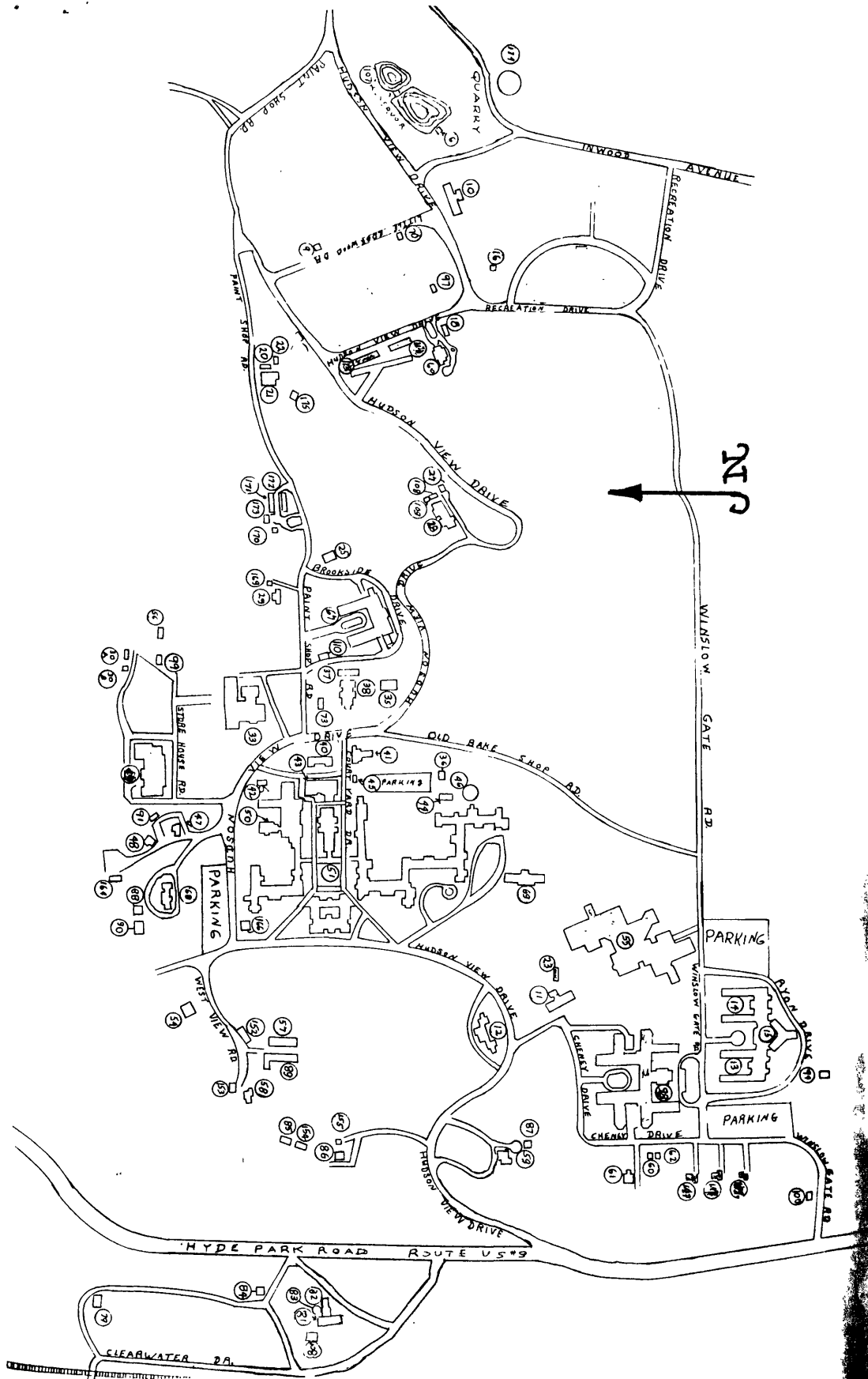
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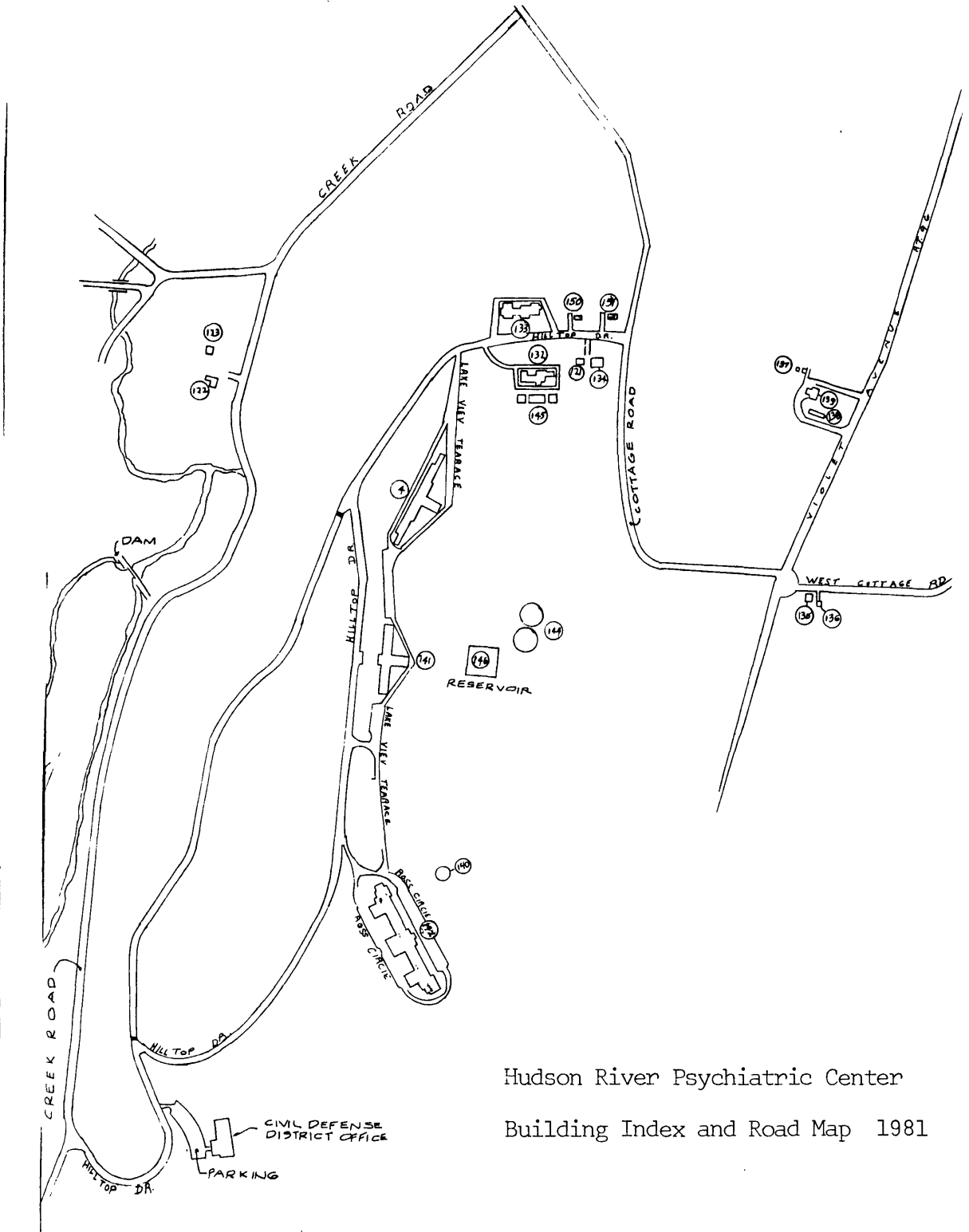
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| AHRET AVE | | | | | |
| RECREATION DRIVE | | | | | |
| 375048 | | | | | |
| 375049 | 375052 | 375055 | 375058 | 375061 | 375064 |
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44511
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Hudson River Psychiatric Center
 Building Index & Road Map



Hudson River Psychiatric Center
 Building Index and Road Map 1981

HUDSON RIVER PSYCHIATRIC CENTER

BUILDING INDEX

ROAD MAP

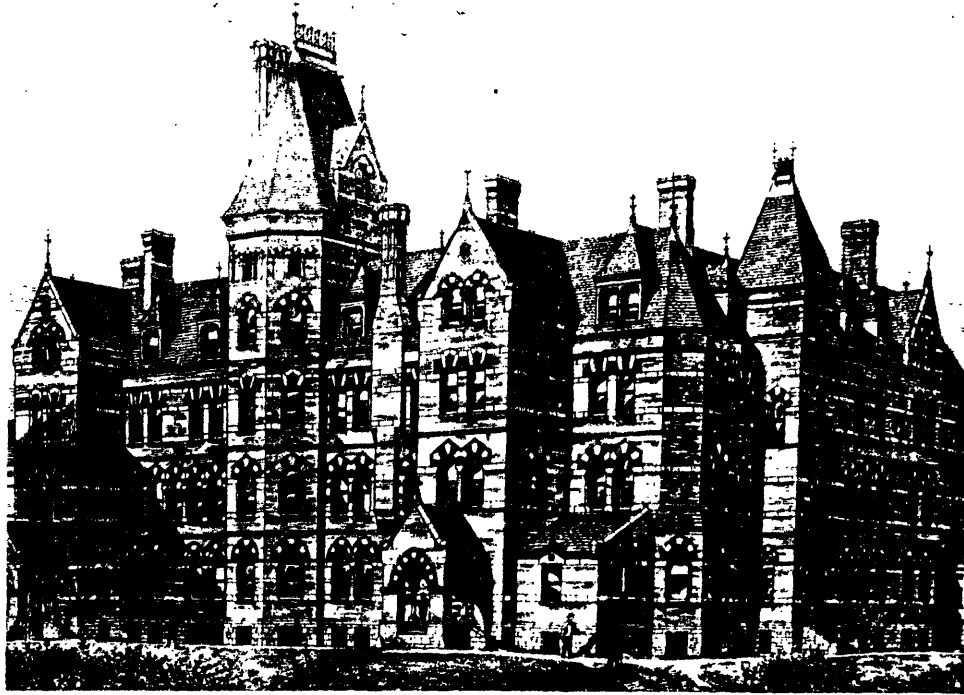
| BUILDING INDEX | | | | | | | | | |
|----------------|----------------------------|-----|--------------------------------|-----|-------------------|-----|-----------------------------|-----|--------------------------------|
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constructed after 1945

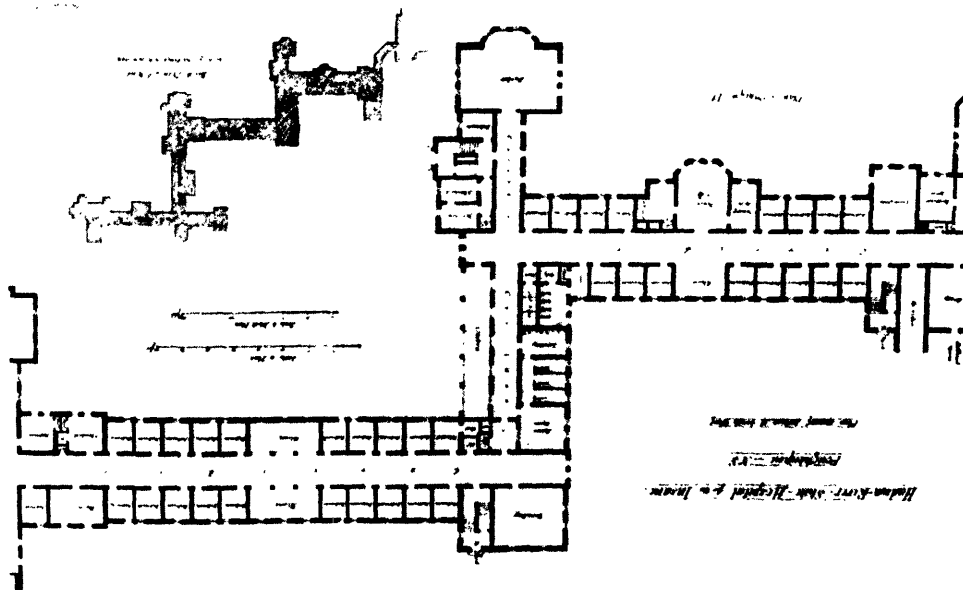
Riverfront complex not on the map

sewage disposal inoperative

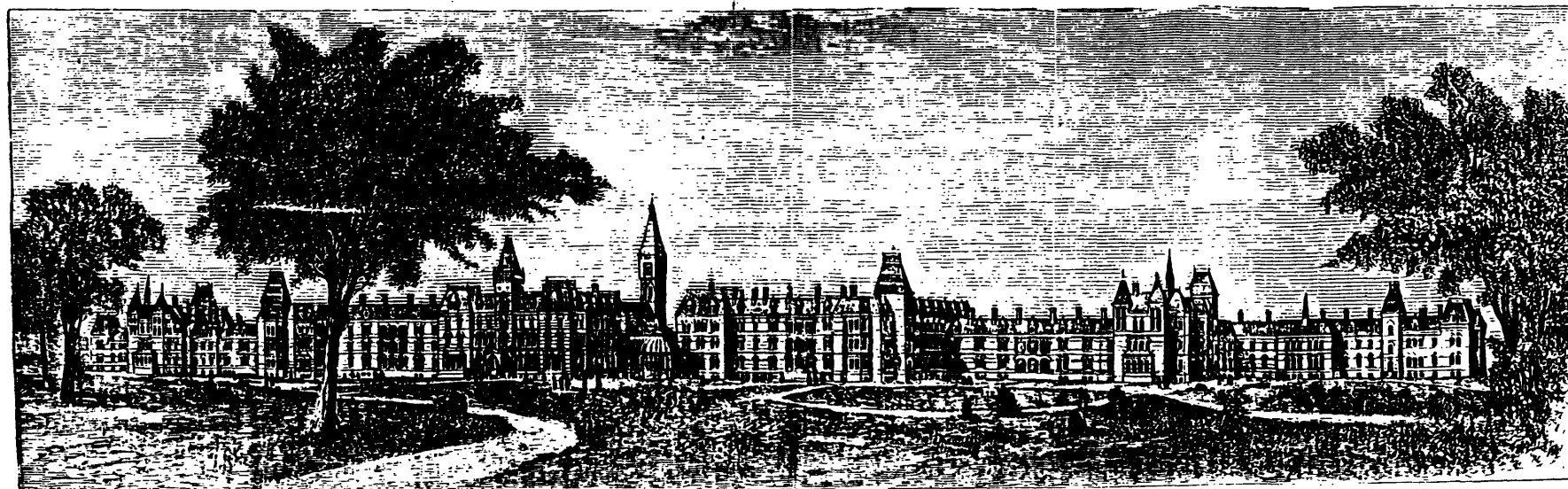
REVISED 1981



34. Hudson River State Hospital, Poughkeepsie, N.Y., 1866.



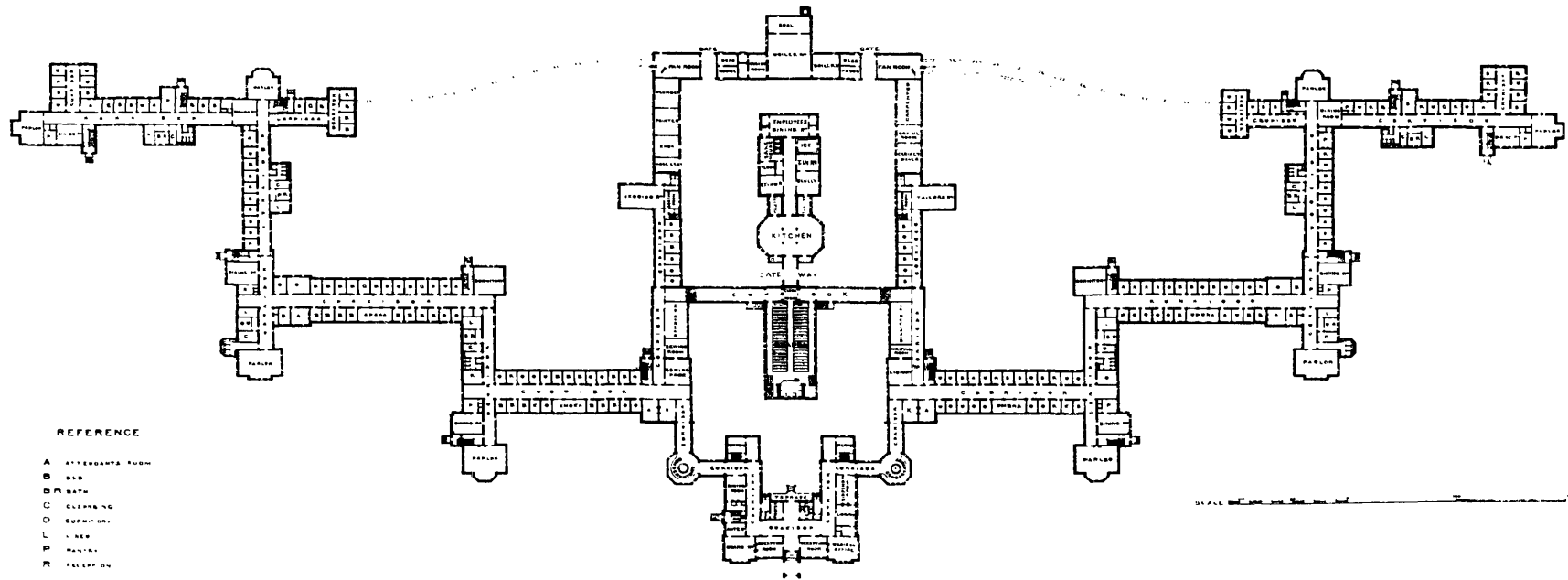
35. Hudson River State Hospital, partial plan.



HUDSON RIVER STATE HOSPITAL FOR THE INSANE, POUGHKEEPSIE, DUTCHESS COUNTY, NEW YORK.—FROM THE DESIGNS OF THE ARCHITECT, FREDERICK CLARKE WITHERS.—[SEE PAGE 191.]

**DESIGN FOR THE
HUDSON RIVER STATE HOSPITAL FOR THE INSANE
POUGHKEEPSIE N. Y.
1867**

VAUX, WITHERS & CO ARCHITECTS



PLAN OF PRINCIPAL FLOOR

Architectural Geographic Institute, New York

Hudson River Psychiatric Center, New York
Architect's Drawing. Detail
Main Floor, showing rooms.
Photo credit: Hudson River Psychiatric Center

