



**ALAMEDA COUNTY COMMUNITY DEVELOPMENT AGENCY
PLANNING DEPARTMENT**

STAFF REPORT

TO: Castro Valley Municipal Advisory Council
HEARING DATE: November 25, 2019

GENERAL INFORMATION

INFORMATION ITEM: Proposed Demolition of the Whitecotton Cottage on the County-Owned Fairmont Hospital Campus, and Parks, Recreation and Historical Commission Nomination of the Cottage to the Alameda County Register as a Landmark

RECOMMENDATION: Review and discuss the information presented regarding the Whitecotton Cottage, take public testimony, and provide comments to staff.

PROJECT BACKGROUND

The Whitecotton Cottage is located on the County-owned Fairmont Hospital Campus in Castro Valley and served as the residence for the facility's superintendent from its construction in 1903 into the 1950's. From the 1970's to the year 2000 the building was used as office space. It has remained vacant since 2000 and its condition has declined significantly due to a lack of maintenance. The County's General Services Agency (GSA) has proposed the demolition of the house due to unsafe conditions resulting from its deteriorated state.

DISCUSSION

On July 17, 2019, GSA released a Draft Environmental Impact Report (DEIR) for the *Whitecotton Cottage Demolition Project* for public review and comment. The DEIR finds that if the building were to be demolished the loss of the historical resource could not be fully mitigated, resulting in a "significant and unavoidable impact." The DEIR cites two historical assessments, one from 2001 and the other from 2018 (attached). Both reports found the building to be eligible for the California Register of Historical Resources.

The County Parks, Recreation & Historical Commission (PRHC) is charged with overseeing historic preservation efforts in the Unincorporated County. Commissioners are appointed by the Board of Supervisors to contribute their knowledge and expertise in preservation-related issues. At its September 5, 2019 meeting, the PRHC voted unanimously to oppose the proposed demolition of the Whitecotton Cottage and to send the attached letter to GSA commenting on the DEIR. At its October 3, 2019 meeting, the PRHC voted to begin the process of nominating the Whitecotton Cottage to the County Register as a Landmark in accord with Sections 17.62.060 and 17.62.080 of the County's Historic Preservation Ordinance (See attached list of Relevant Ordinance Sections). Approval by the Board of Supervisors is necessary to place the building on the Register. Under Section 17.62.090 of the ordinance, any nominated resource proposed for consideration as a Landmark receives the same protection as a designated Landmark for 180 days following its nomination.

In addition, Sections 17.62.150 and 17.62.160 of the Historic Preservation Ordinance establishes a process for review of the proposed demolition or relocation of buildings or structures that are at least fifty years old. This process includes referral of the proposed demolition of any structure found to be of potential historical significance to the PRHC for consideration of a Certificate of Appropriateness for the demolition.

Under Section 17.62.240 of the Ordinance, the provisions of the Ordinance apply to County-owned property, as well as private property, unless the Board of Supervisors votes to exempt individual county projects or categories of county projects. No application for a Certificate of Appropriateness has been submitted to the PRHC.

CONCLUSION

Staff requests that Councilmembers review and discuss the information presented regarding the Whitecotton Cottage, take public testimony, and provide comments to staff on the proposed demolition of the Whitecotton Cottage and the nomination of the house to the County Register as a Landmark.

Attachments:

- *Historical and Architectural Assessment of the Superintendent's Residence at Fairmont Hospital, Woodruff Minor, August 2001*
- *Superintendent's Residence/Whitecotton Cottage Fairmont Hospital, Alameda County Historic Resource Summary, Preservation Architecture, August 27, 2018*
- *Relevant Sections of the Alameda County Historic Preservation Ordinance*
- *Letter from the PRHC to GSA regarding the Draft EIR for the Whitecotton Cottage Demolition Project*
- *Department of Parks and Recreation, Primary Record, Carey & Co., February 2008*

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Historical and Architectural Assessment

**Superintendent's Residence
Fairmont Hospital
San Leandro
CA**

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August 31, 2001

CONTENTS

Summary of Findings	1
Background	1
Historical Overview of Fairmont Hospital	1
Historical Overview of Superintendent's Residence	4
Description of Superintendent's Residence	5
Findings	6
Sources	8
Map and Photographs	
Figure 1: Location Map	
Figure 2: West elevation of residence	
Figure 3: South elevation of residence	

Summary of Findings

This report provides an historical and architectural assessment of the former Superintendent's Residence ("White Cotton Cottage") on the campus of Fairmont Hospital, San Leandro, California. Owned and operated by Alameda County since 1869, the hospital was originally known as the Alameda County Infirmary. The facility has undergone several major phases of redevelopment since the early 1900s. The Superintendent's Residence, erected in 1903, is the oldest surviving building on the campus. It is also an excellent local example of the Shingle Style, a popular eclectic style of the late 19th and early 20th centuries.

Potential significance has been assessed in relation to the criteria of the California Register of Historical Resources, the standard for evaluating cultural resources under the California Environmental Quality Act (CEQA). Based on an evaluation of its historical associations and architectural qualities, the Alameda County Infirmary Superintendent's Residence appears to be eligible for listing on the California Register of Historical Resources.

Background

The report was prepared by Woodruff Minor, an architectural historian who meets the qualifications of the State Office of Historic Preservation. Michael R. Adamson served as research assistant. The property was inspected on July 16, 2001, when field notes were taken. Research was performed at the following repositories and archives: Earth Sciences and Map Library, University of California, Berkeley; Office of the Alameda County Board of Supervisors, Oakland; and the Oakland History Room and Newspaper Room, Oakland Public Library. Sources are listed at the end of the report.

Historical Overview of Fairmont Hospital

Under early California law, county governments were mandated to provide medical care for the poor (the "indigent sick") within their jurisdiction. State laws enacted in 1855 and 1860 enabled county governments to levy taxes for the purpose of establishing county infirmaries. The tax revenues could be used to buy land, erect buildings, and hire administrative and medical staff.

Following its establishment in 1853, Alameda County initially provided medical care under contract to private practitioners. In 1864, the Alameda County Board of Supervisors rented a house in Oakland to serve as a hospital, staffed by one doctor and a steward. This facility was closed in 1869, when the County's new infirmary opened on a rural site south of Oakland.

Early Development of the Alameda County Infirmiry: 1869–1912

The Alameda County Infirmiry, now known as Fairmont Hospital, was the first medical facility in Alameda County to be owned and operated by the county government. Acquired in 1869, the site consisted of 123.92 acres of level and sloping land at the base of the hills near the town of San Leandro. Access was provided by a county road (today's Foothill Boulevard) bordering the west edge of the property.

The first hospital building at the new site opened in 1869. Several buildings were added during the 1870s, and other facilities were erected gradually over the following three decades. By 1910, the Alameda County Infirmiry consisted of a dozen or so larger buildings and many smaller structures clustered at the northwest corner of the hospital property. They included an administration building, various wards, a dining hall, laundry, shop buildings, a chapel, and staff residences, including the residence of the superintendent and resident physician. Buildings were wood-framed and many were of temporary construction. There was no coherent site plan, and the grounds were minimally landscaped.

Most of the hospital property functioned as a farm supplying milk, eggs, pork, and bacon to the infirmiry (and later to other county hospitals). Barns and sheds were grouped to the east of the infirmiry complex. Much of the rest of the property was given over to grazing. Because of this farming activity, the Alameda County Infirmiry was commonly known as "The Farm." The farm itself remained in operation on the hospital grounds until the 1950s.

Expansion and Reconstruction: 1912–1945

The Alameda County Infirmiry had long been considered inadequate due to substandard facilities and chronic overcrowding. In 1912, the Board of Supervisors agreed to hold an architectural competition for a new hospital complex to replace the existing infirmiry. The supervisors retained Henry H. Meyers as consulting architect to administer the competition. First prize was awarded in 1913 to San Francisco architect Charles Peter Weeks.

The winning design called for linked groups of buildings oriented around two axes, running east–west and north–south. All buildings were to be steel-framed, with hollow-tile walls, stucco veneer, and Renaissance styling. The principal (east–west) axis, facing west to Foothill Boulevard, contained an administration building and wards for short-term acute care. The north–south axis contained men's and women's dormitory wards for long-term convalescent care. The ten dormitories (and adjoining assembly and dining halls) were grouped around a rectangular courtyard incorporating a small artificial lake (already on the site). Estimated cost of construction for the entire complex was \$1 million. In 1916, work was completed on two ward buildings and an assembly hall at the north end of the dormitory group; the rest of the proposed complex was never built.

The complex was not completed due to budgetary constraints and a new county policy calling for separate medical facilities with specialized functions rather than

one general facility. Arroyo Sanatorium (1918), near Livermore, provided long-term care for curable tuberculosis patients. Delle Valle Farm (1924), adjoining Arroyo Sanatorium, served as a treatment center for tubercular children. Highland Hospital (1926), located in East Oakland near the county's population center, functioned as a major acute-care facility. Small outpatient clinics were also opened in several of the county's cities.

Under this new plan, the Alameda County Infirmary—renamed Fairmont Hospital when Highland Hospital opened—specialized in long-term care for convalescent patients, the aged and infirm, and persons with chronic and contagious diseases. Patients treated at Highland were transferred to Fairmont for recovery. Incurable tuberculosis patients were domiciled at Fairmont rather than at Arroyo or Del Valle.

Fairmont Hospital was largely rebuilt between 1917 and 1922 to accommodate its new mission. A number of older buildings were rehabilitated and remodeled, and some were moved to new sites. More than a dozen new buildings were erected. The hospital campus was extended south. New structures included ward buildings, dormitories for nurses and employees, a cafeteria, laundry, powerhouse, corporation yard, greenhouse, and entrance gates. The last major project prior to World War II was a ward building for incurable tuberculosis patients, opened in 1931 at the south end of the campus. The grounds were extensively landscaped with trees, shrubs, lawns, and trellis-covered walkways. The architect responsible for these site improvements was Henry H. Meyers, who served as the county's consulting architect until his retirement in 1935.

Developments since World War II: 1945–present

The next major phase of development at Fairmont occurred in the decade following World War II. The hospital ceased caring for the aged and infirm during these years, concentrating instead on convalescent care and chronic rehabilitation. Based on a 1935 master plan by architect Will G. Corlett, the hospital was substantially rebuilt between 1946 and 1955. New construction during this period included three large ward buildings, an interns' building, an administration building, a cafeteria, a powerhouse and shop building, and a firehouse. Most of these structures were designed by Corlett, and most are located in the south section of the hospital campus in a landscaped setting with covered walkways. Reinforced-concrete construction and Spanish Colonial Revival styling followed the model of the 1931 tuberculosis ward.

The postwar reconstruction of Fairmont Hospital was brought to completion in the early 1960s by the addition of a rehabilitation ward and a laundry at the south end of the campus. Facilities added since the 1960s have focused on long-term mental-health care. They include the Villa Fairmont (1981), Eden Outpatient Facility (1991), and John George Psychiatric Pavilion (1992).

Historical Overview of the Superintendent's Residence

Prior to the construction of the existing building in 1903, the Superintendent of the Alameda County Infirmary (who also bore the title of Resident Physician) presumably lived elsewhere on the grounds, though no reference to an earlier residence has been found. In any case, the new residence met a long-felt need at the hospital for a permanent, detached dwelling for the superintendent. The site at the north edge of the campus, apart from the other buildings, provided a modicum of privacy that was progressively enhanced as the landscaping took hold. By the 1930s, the residence sat in a thick grove of trees, screened from the hospital proper. The elegant little house in its secluded setting would have given the superintendent a sense of retreat from the stress of a demanding job. In addition, the superintendent's family required separation from the hospital grounds, where patients with contagious diseases were housed.

The first mention of the residence in the *Minutes* of the Alameda County Board of Supervisors, who oversaw the hospital, appeared in the entry for May 4, 1903. At that meeting, "The county surveyor presented, and the Board approved and adopted, the plans and specifications for the residence of the Superintendent and Resident Physician. A contract bid notice is to be published in the Oakland Tribune, fixing the final day for acceptance of bids at May 25, 1903." Five bids were submitted, ranging from \$5,400 (E. Andersen) to \$6,100 (George C. Noll). The *Minutes* for the May 25th meeting noted: "Finding the lowest bid to be satisfactory, the Board accepted the bid of, and awarded the building contract to, E. Andersen, stipulating that all work had to be completed within ninety days from the Board's acceptance of a bond from Andersen." This occurred at the June 8th meeting, as recorded in the *Minutes*: "E. Andersen presented a contract and bond for the construction of the Superintendents' cottage. The Board approved the bond." Presumably the building was completed in September, though no further reference to the project has been found in the 1903 *Minutes*.

Little is known about the contractor, E. Andersen. There is a listing for an "Edward Andersen, carp (carpenter)" in the 1910 city directory for San Francisco. The name does not appear in city directories for Oakland, Alameda, and Berkeley. The architect of the building has not been documented. It is possible that the county surveyor (who presented the plans to the supervisors) may have been the designer, but it is not likely given the sophistication of the building. At any rate, the index to the *Minutes* of the Board of Supervisors makes no mention of a contract being awarded to an architect, nor do the contractor's magazines of the period. Oakland newspapers from June–September 1903 were scanned for some mention of the building, but no articles on the project were located.

The later history of the structure has not been fully documented. On the 1928 Sanborn map of the hospital campus, the building is identified as "Sup't's D" ("Superintendent's Dwelling"). This designation also appears on the revised 1950 Sanborn map of the campus. Site plans of Fairmont Hospital, dated 1948 and 1949, identify the building simply as "Cottage No. 1." In a 1973 site plan, it is identified as "Public Works Office." To summarize, it appears that the Superintendent's Residence served its original purpose until the 1950s, and that

had been adapted to new uses by the 1970s. The most recent tenant was a community-based organization called Humanistic Alternatives to Addiction Research and Treatment (HAART). Since 2000, the building has been vacant.

Description of the Superintendent's Residence

The building occupies a somewhat isolated site near the northwest corner of the Fairmont Hospital Campus. It is encompassed by a small grove of mature trees, both conifer and deciduous, with a variety of shrubs planted around the base of the building. Remnants of a more extensive landscaping scheme survive, such as an abandoned terrace with deteriorated brick stairs on the south side of the house. An unpaved parking area, served by a short access road, adjoins the terrace. The house is on axis with the hospital's central quad, which is situated several hundred yards to the south.

The building is a one-and-one-half story, wood-frame structure with a brick foundation and partial basement. Walls are sheathed in wood shingles. The house has a generally rectangular plan elaborated by a staggered section on the east and a prominent semi-circular bay on the west. The roof system consists of a main gable facing south and north, an east-facing subsidiary gable on the house's staggered east section, and a rounded hip on the west-facing semi-circular bay. Shed-roofed dormers extend across the east and west slopes of the main gable. The wood-sash windows (double-hung and casement) have thin surrounds and simply detailed sills. The soffit eaves are delicately trimmed with narrow wood molding and understated dentil courses.

The symmetrical south façade, facing toward the hospital complex, has a full recessed porch with shingled piers. The glass-panel double doors of the entry are flanked by tall casement windows wrapping around the porch. Trimmed with mullion borders, they were added when the porch was enclosed. Two sets of casement windows (three per set) form a balanced pair in the gable, with an attic vent above. The focus of the west façade is the centrally placed semi-circular bay. A decorative course of sawtooth and gap-tooth shingles demarcates the two levels of the bay. Three double-hung windows wrap around the lower level, and three small casement windows with diamond-pattern sash are set into a stucco band tucked under the eave. The adjoining dormers have double-hung windows, with tiny casement windows flanking the bay. A porch supported by one shingled post is recessed into the northwest corner of the house, sheltering an entry with a massive wood door. The north façade is similar to the south façade, though lacking a full porch. The east side of the house is less formally composed, with windows at both levels and a tall brick chimney.

The interior is currently accessible through the door on the northwest porch. One enters a medium-sized entry hall. A curving seat is set into the rounded bay alcove on the right. To the left is a partially enclosed opening framing the staircase. Straight ahead, through a wide opening with pocket doors, is a large living room that once extended the full width of the house. A partition to the left cuts off a fireplace with an elaborate over-scaled mantle from the rest of the

room. Offices have been partitioned off in the former porch area. A single pocket door in the entry hall, to the left of the staircase, opens into a narrow hallway adjoined by three small rooms that may have originally functioned as servants' quarters. The hallway connects with a kitchen and two bathrooms at the rear. The elaborate staircase, with two landings, winds up to a gallery-like hall that wraps around the stairwell on all four sides. The staircase has multiple newel posts and a banister with curved elements; the newel posts and railing of the hall match the staircase. The semi-circular bay alcove opens onto the hall. Two bedrooms run across the north end of the house, two bedrooms are at the south end, and two bathrooms adjoined by closets are on the east side. The interior has plaster walls, plaster cove ceilings, and extensive wood trim.

The residence combines elements of the Queen Anne and Colonial Revival styles. The semi-circular bay window with its band of decorative shingles recalls the Queen Anne predilection for applied ornament and rounded forms. The shingle skin and gables belong to that phase of the Colonial Revival sometimes called "Old Colonial," which looked back to the vernacular, late-medieval architecture of 17th century New England. (The symmetry of the front façade and the eave denticulation make muted reference to 18th century colonial architecture, which tended to be Georgian, i.e., classically derived.) Eclectic combinations of Queen Anne and "Old Colonial" elements produced the residential Shingle Style, invented in the 1880s by several leading East Coast firms. Introduced in the Bay Area around 1890, the style achieving widespread popularity by 1900, when it began to be superseded by the more rustic shingled style known as Craftsman. The Superintendent's Residence is an excellent local example of the Shingle Style.

The house and setting retain a relatively high degree of integrity. Although the landscape plan of the garden is no longer intact and the grounds are unkempt, many of the trees survive. Remarkably, the site still retains a feeling of seclusion on Fairmont's crowded campus. The only significant change to the exterior of the house is the front porch, which appears to have been enclosed at an early date (ca. 1915-25). The alteration is compatible with the original design. The interior has been altered by the application of paint to the woodwork; by the addition of partitions to the entry hall, living room, former front porch, and south bedrooms; and by the remodeling of the bathrooms and kitchen.

Findings

The Superintendent's Residence at Fairmont Hospital appears to be eligible for the California Register of Historical Resources under Criterion 1 (historical associations) and Criterion 3 (architectural quality). To be eligible for the California Register, an historical resource must be significant at the local, state, or national level, under one or more of the following four criteria:

- (1) It is associated with events that have made a significant contribution to the broad patterns of local or regional history, or the cultural heritage of California or the United States;

- (2) It is associated with lives of persons important to local, California, or national history;
- (3) It embodies the distinctive characteristics of a type, period, region, or method of construction, or represents the work of a master, or possesses high artistic values; or
- (4) It has yielded, or has the potential to yield, information important to the prehistory or history of the local area, California, or the nation.

The Superintendent's Residence appears to be eligible for the California Register under Criterion 1 because of its association with the Alameda County Infirmary and Fairmont Hospital. As the residence of the superintendent of the first county-run hospital in Alameda County, operating under a statewide mandate to provide medical care for the poor, the building "is associated with events that have made a significant contribution to the broad patterns of local or regional history, or the cultural heritage of California. . . ." It is the only intact building on the campus associated with the Infirmary's first phase of construction. It is also the oldest surviving building on the Fairmont Hospital campus—and probably the oldest building in Alameda County associated with a county-run hospital. As such, it appears to possess historical significance on the local level.

The Superintendent's Residence appears to be eligible for the California Register under Criterion 3 because it "embodies the distinctive characteristics of a type, period, region, or method of construction. . . [and] possesses high artistic values." The residence is an excellent and illustrative local example of the Shingle Style, embodying national design trend of the period. The house also displays a high level of workmanship as well as a high degree of integrity. As a presumably rare building type—an early 20th-century superintendent's residence on a hospital campus—the structure has further importance. As such, it appears to possess architectural significance on the local level.

Over the past two decades, most of the older buildings at Fairmont Hospital have been demolished or abandoned. The reasons for this include abatement for seismic safety, structural damage from the 1989 Loma Prieta earthquake, and site clearance for new projects. Today, extent historical resources are limited to the former Superintendent's Residence (1903), the Chapel (ca. 1910), the former Nurses' Dormitory (1918), Ward Building D (1931), and a half-dozen structures (and landscape features) dating from 1949–1955. With the exception of the Superintendent's Residence and Nurses' Dormitory, these older buildings and landscape features form the central quad of the campus. The Superintendent's Residence, though located to the north of the quad, is on axis with it. Together, these ten structures—the nine buildings of the quad and the residence—may be eligible for listing on the California Register of Historical Resources as an historic district. However, to make such an assessment would require further analysis beyond the scope of this report.

Sources

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**Figure 1. Map of a Portion of Fairmont Hospital, ca. 1985.
(Superintendent's Residence circled.)**


 Fairmont Hospital.

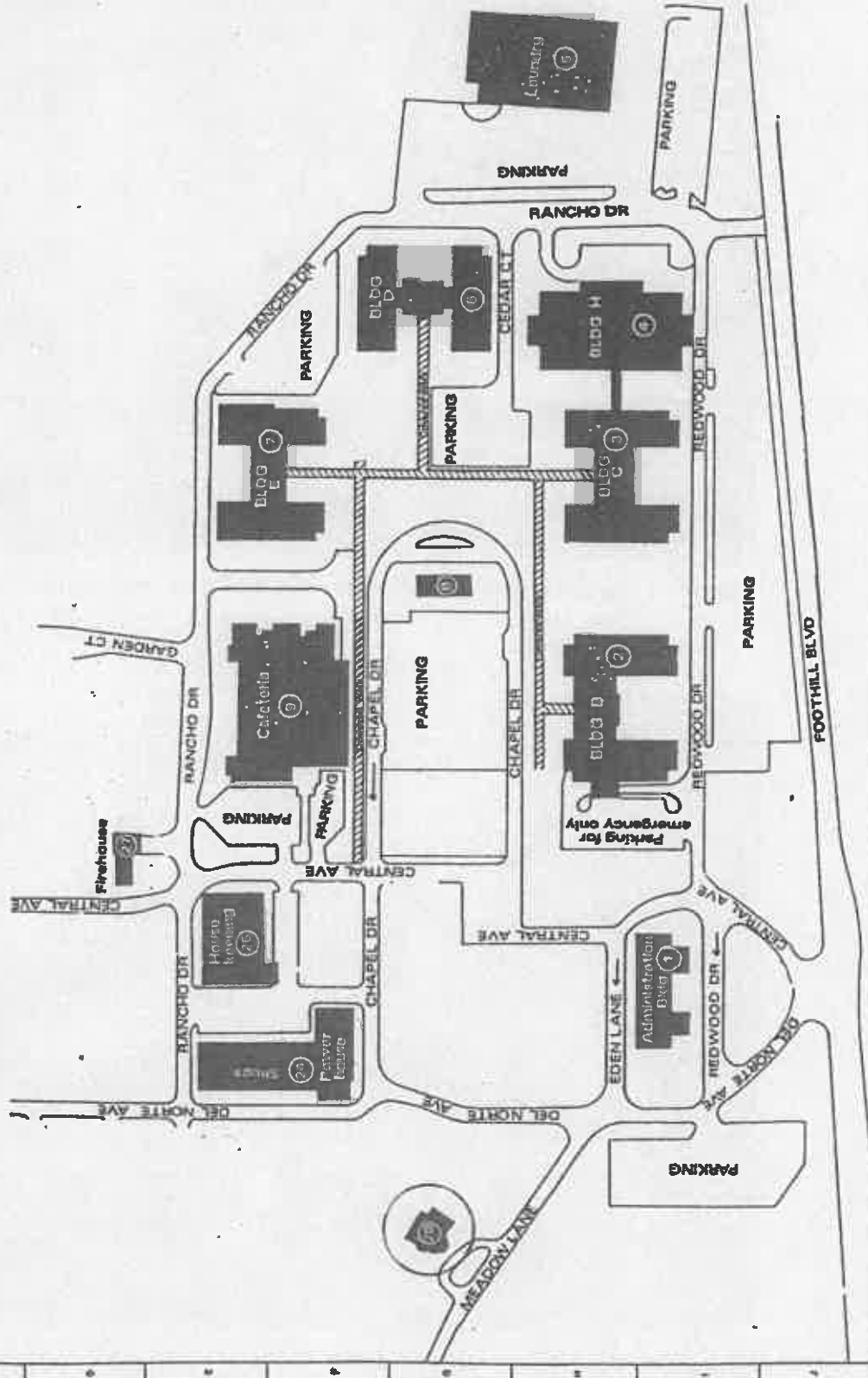




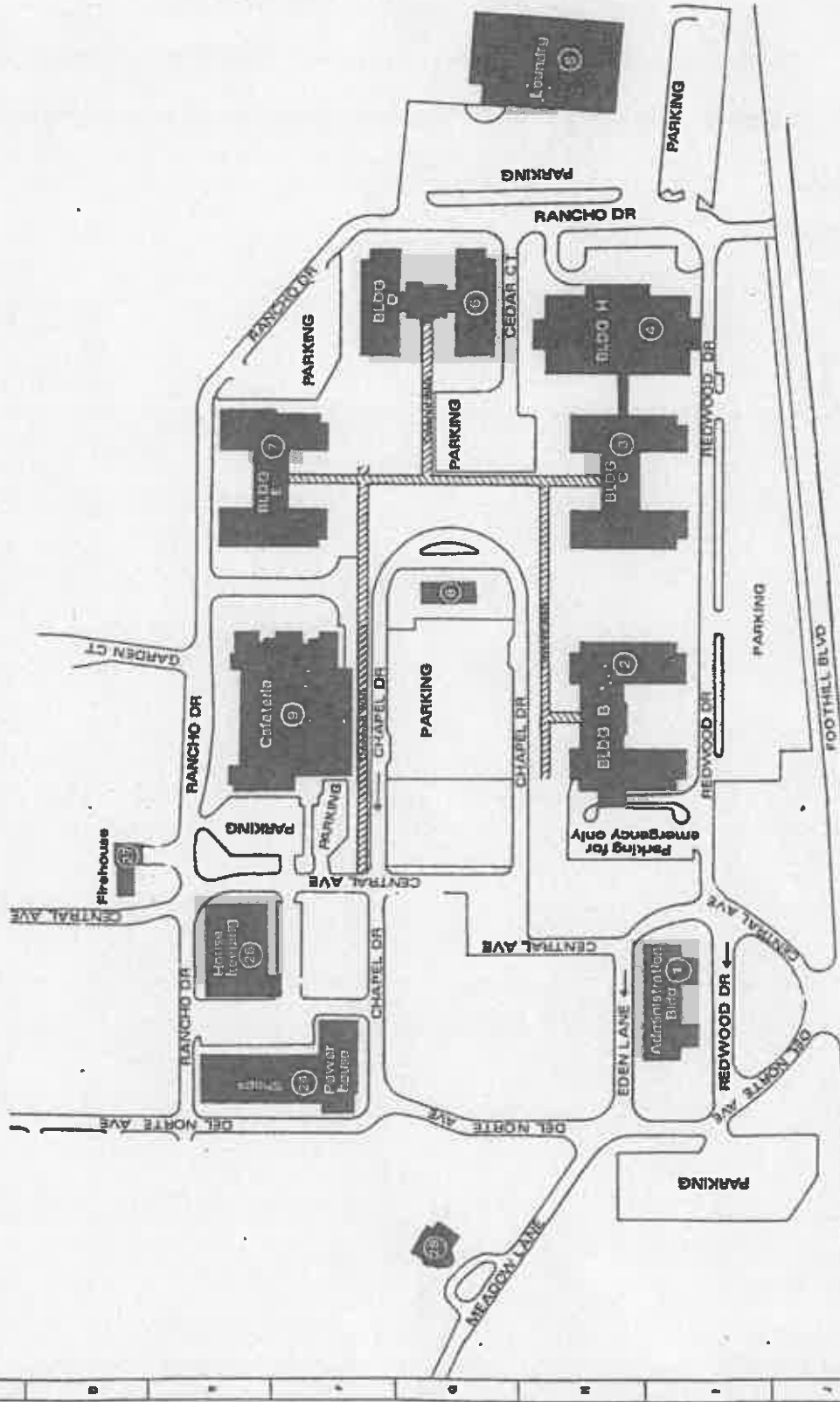
Figure 2. West Elevation, Superintendent's Residence, Fairmont Hospital.



Figure 3. South Elevation, Superintendent's Residence, Fairmont Hospital.



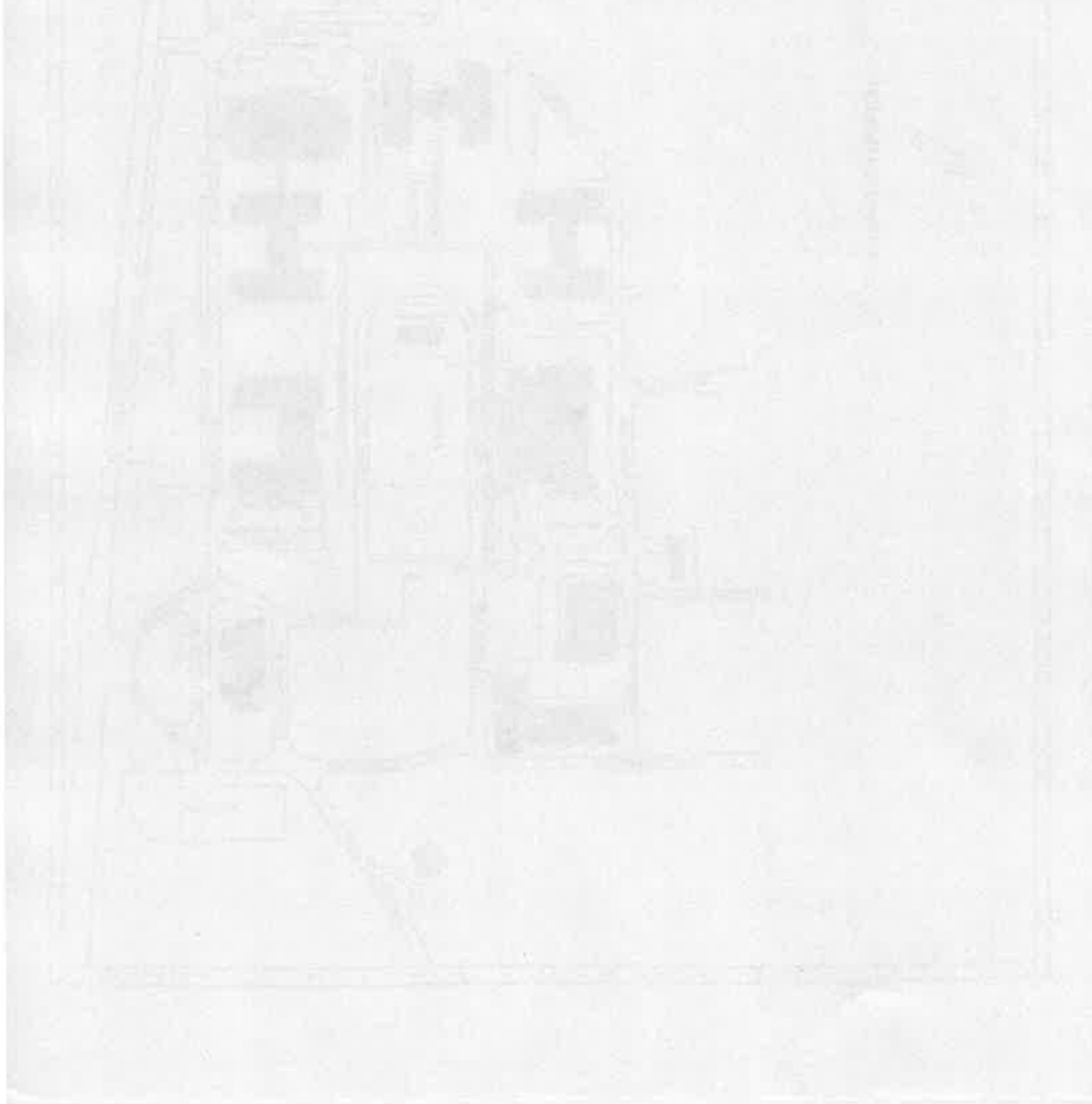
Fairmont Hospital



**Figure 1. Map of a Portion of Fairmont Hospital, ca. 1985.
(Superintendent's Residence circled.)**

Figure 2. West Elevation, Superintendent's Residence, Fairmont Hospital.

Figure 3. South Elevation, Superintendent's Residence, Fairmont Hospital.



PRESERVATION ARCHITECTURE

August 27, 2018

Superintendent's Residence/Whitcotton Cottage Fairmont Hospital, Alameda County Historic Resource Summary

Introduction

As requested by the County of Alameda's General Services Administration, this report addresses historic resource issues related to the former Superintendent's Residence (aka Whitcotton Cottage) located on the campus of Alameda County's Fairmont Hospital. This evaluation has specifically been requested by the County to address the subject building's historic resource status and is based on several site visits and research, including historical research inquiries at:

- The Northwest Information Center (NWIC) of the California Historical Resources Information System (CHRIS), where there are no available records for the subject property;
- The Oakland Public Library's History Room, which had a newspaper clipping folder for Fairmont Hospital with general historical information;
- The Hayward Area Historical Society (HAHS), which has a small collection of previous research records for Fairmont Hospital, including a research file folder specific to the "Fairmont Hospital – Superintendent's Residence," and which is discussed below.

Resource Summary

The former Superintendent's Residence was previously evaluated for the County and resulted, in August of 2001, in the publication of an *Historical and Architectural Assessment of the Superintendent's Residence at Fairmont Hospital* for the County of Alameda and prepared by the architectural historian Woodruff Minor (attached).

While there was evidently minimal available historical information about the building, that report pinpointed the 1903 origins of the Superintendent's Residence and indicated that it remained in use as the residence of the hospital superintendent (aka resident physician) until c1970, when it was adapted for other hospital program uses, until c2000, when it was vacated. That report also parenthetically identified the building by its common name, *White Cotton Cottage*.

Regarding that common name, a c1980 map of the campus was included in the 2001 report and is also presently displayed on the wall in the ground floor of the existing cafeteria building. Alongside the latter, there is a building index and which labeled the subject building the "Whitcotton Cottage." That label is evidently the accurate one, as Whitcotton is the surname of a family whose head, Dr. G. Otis Whitcotton, was medical director of the Alameda County hospitals from c1947 to c1960. While there is no specific evidence for this assertion, nor evidence that Whitcotton may have resided in this house, it may be presumed that the Whitcotton name was given to this building during or after his leadership of the County hospitals.

In summary, based on the 2001 evaluation, the subject building has been identified as an historic resource per a finding of eligibility to the California Register of Historical Resources (CR), the bases for which are twofold:

- Under CR criterion 1, the subject building is identifiably associated with historic events, specifically the original Alameda County Infirmary and its successor, Fairmont Hospital;
- Under CR criterion 3, the subject building is identified as embodying design and construction distinction as it is “an excellent and illustrative local example of the Shingle Style.”
(from *Assessment*, p7)

Consequently, the former Superintendent’s Residence/Whitecotton Cottage is presently listed on the Alameda County Register of Historic Resources (see attached).

In addition to identifying applicable areas of significance, the previous evaluation requisitely addressed the building’s historic “Integrity.” For historic resource evaluation purposes, “Integrity” is a secondary measure of a given resource’s identified significance – In addition to fulfilling a given criteria of significance, the resource must also retain sufficient integrity with which to convey its importance in the present. To reiterate, in this case, the identified importance of the former Superintendent’s Residence/Whitecotton Cottage is its association to the original Alameda County Infirmary and early Fairmont Hospital, plus its architectural distinction as an excellent example of the Shingle Style. Relative to which, the previous evaluation generally concluded that the “house and setting retain a relatively high degree of integrity” (*Assessment*, p6).

Evidently, since 2001, further and relatively substantive changes have occurred to the site, the setting and the building itself, including:

- Additional building removals and additions on the directly adjacent campus;
- Overall exterior building deterioration due to its vacancy;
- Deterioration of the surrounding landscape;
- Extensive interior dilapidation.

Such changes have resulted in the existing poor condition (i.e., overall design and material degradation and loss) of the subject building exterior and site, and of the very poor condition (i.e., extensive degradation) of its interior.

Thus, at this juncture, a re-evaluation of the integrity of the subject resource is warranted in order to confirm its current historic resource eligibility status and based on the seven “aspects of integrity” defined under the National and California registers, as follows:

- *Location* – the former Superintendent’s Residence/Whitecotton Cottage remains in its historic location, so this integrity aspect is fully intact;
- *Setting* – the former residence has an immediate and associated setting amidst its early landscape. While deteriorated and beyond its immediate setting substantially changed, the integrity of its setting is largely intact;
- *Feeling and Association* – the former residence remains associated with yet semi-isolated from the hospital, which was also an original characteristic. Though use changes and subsequent vacancy have diminished the historic feeling of this former residence as well as its residential association, both integrity aspects are partially intact.

Consequently, under these four related aspects of integrity, the former Superintendent’s Residence/Whitecotton Cottage continues to convey the significance of the identified historic events,

specifically the original Alameda County Infirmary and the early Fairmont Hospital, of which the subject building is the only (now partially) intact as well as oldest surviving building.

There are three additionally interrelated integrity aspects – *design, materials* and *workmanship* – that directly relate to the subject building's original and early design and construction. Per photos included in the 2001 evaluation (figs.2 & 4), the former residence was then in an intact state and in use. Since, the building has been vacant. Its current state is dilapidated, fenced and boarded-up. At present, it is in a diminished state with respect to the workmanship that is embodied in its original/early design and materials. As these three aspects of integrity have been substantially affected and are insufficiently intact, the extant building does not continue to convey design or construction excellence or importance. Therefore, the existing Superintendent's Residence/Whitcotton Cottage no longer appears to meet CR criterion 3.

In conclusion, a single basis for a finding of historical significance has sustained. Based on its association to historic events – both the original Alameda County Infirmary and the early Fairmont Hospital – the Superintendent's Residence/Whitcotton Cottage remains eligible for the CR, though no longer on the basis of its design and construction..

Signed:

A handwritten signature in black ink, appearing to read "Mark Hulbert", with a long horizontal flourish extending to the right.

Mark Hulbert
Preservation Architect

attached: figs.1-4; 2001 historic resource evaluation; page from Alameda County Register



Fig.1 – Superintendent's Residence/Whitecotton Cottage, Front (south), 2018



Fig.2 – Superintendent's Residence/Whitecotton Cottage, Front (south), 2001



Fig.3 – Superintendent's Residence/Whitecotton Cottage, West side, 2018

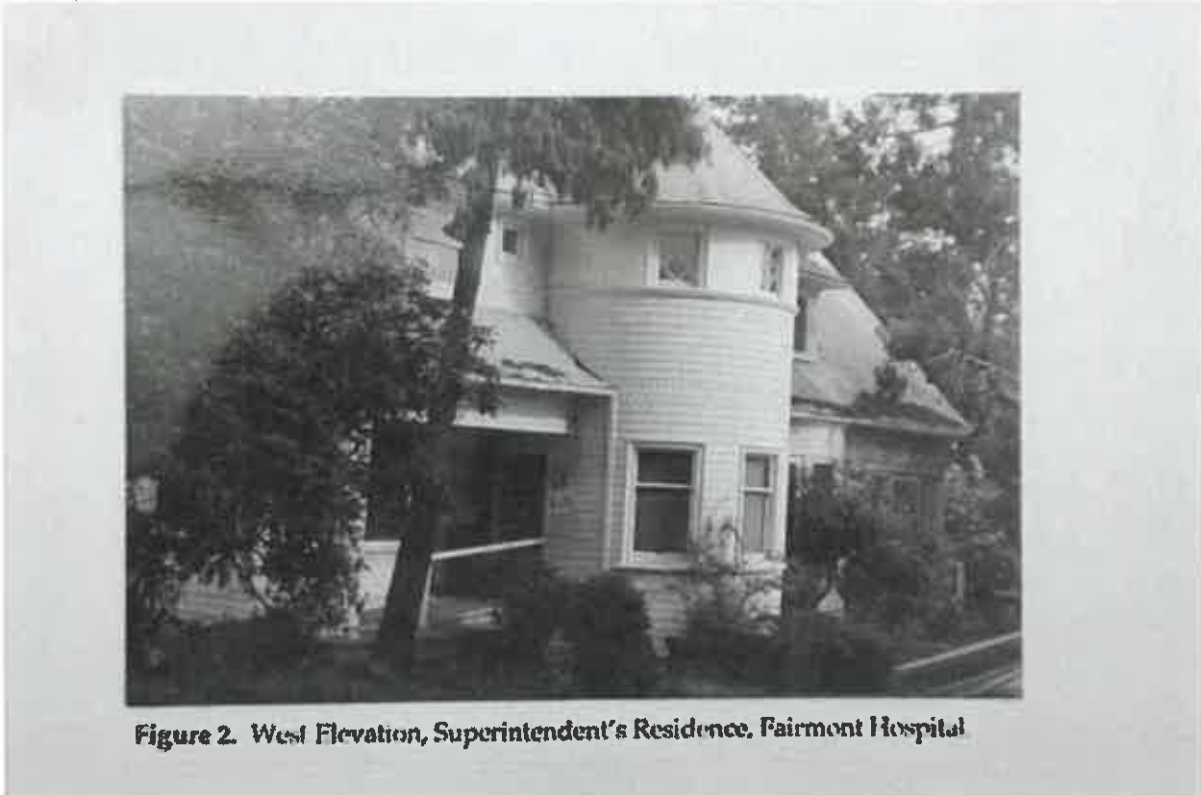


Figure 2. West Elevation, Superintendent's Residence, Fairmont Hospital

Fig.4 – Superintendent's Residence/Whitecotton Cottage, West side, 2001

Relevant Sections of the Alameda County Historic Preservation Ordinance

17.62.060 - Criteria and requirements for placement on, and deletion from, the Alameda County Register.

The criteria and requirements for placement on, or deletion from, the Alameda County Register as landmarks, historic preservation districts, contributing resources or structures of merit are as follows:

- A. A nominated resource shall be added to the Alameda County Register as a landmark if the Board of Supervisors finds, after holding the hearings required by this chapter, that all of the requirements set forth below are satisfied:
 1. The nominated resource meets one or more of the following criteria:
 - a. It is associated with events that have made a significant contribution to the broad patterns of the history of the county, the region, the state or the nation;
 - b. It is associated with the lives of persons significant in the county's past;
 - c. It embodies the distinctive characteristics of a type, period or method of construction;
 - d. It represents the work of an important creative individual or master;
 - e. It possesses high artistic values; or
 - f. It has yielded, or may be likely to yield, information important in the prehistory or history of the county, the region, the state or the nation.
 2. The nominated resource has integrity of location, design, setting, materials, workmanship, feeling and association. Integrity shall be judged with reference to the particular criterion or criteria specified in subparagraph (A)(1);
 3. The nominated resource has significance historically or architecturally, and its designation as a landmark is reasonable, appropriate and necessary to promote, protect and further the goals and purposes of this chapter.
 4. The nominated resource has been evaluated by a qualified historical resources consultant who meets one or more of the Secretary of the Interior's professional qualifications standards or who are certified by the register of professional archaeologists, and the evaluator has submitted documents that provide evidence of the resources historical or architectural significance.

17.62.080 - Procedures to nominate resources for placement or deletion from the Alameda County Register.

- A. The following parties shall have the authority to nominate a resource for placement on or deletion from the Alameda County Register as landmarks, historic preservation districts, contributing resources or structures of merit:
 1. The owner of the historic resource proposed for designation, an authorized agent or, in the case of a historic preservation district, no less than fifty-one (51) percent of property owners within the area of the proposed district;
 2. The parks, recreation and historical commission; and
 3. The Board of Supervisors.

However, no nomination for placement on the Alameda County Register as a landmark, or structure of merit shall proceed without the written consent of the property owner on a form supplied by the county.

- C. The parks, recreation and historical commission may initiate the designation of landmarks, historic preservation districts, contributing resources or structures of merit by adopting a resolution of intent to nominate. The commission may adopt a resolution of intent to nominate on its own motion, at the request of the planning department, or at the request of members of the public. Any resolution of intent to nominate initiated by the commission must be based upon the same documentation that would be required of an owner's application for designation and preliminary findings that the resource potentially meets the criteria for either a landmark, structure of merit, historic preservation district or contributing resource provided in Section 17.62.060. The planning department shall notify the owner and the occupants of the property by certified mail thirty (30) days prior to the commission meeting when the subject property of the resolution of intent to nominate shall be considered for nomination and shall request written consent for designation from the owner on a form supplied by the county. The request for written consent for designation shall inform the property owner of the process to be pursued pursuant to Section 17.62.100 and the right of the property owner to grant or withhold consent regarding nominations by the commission. Notice of public meetings shall follow the guidelines established in Section 17.62.120 of this chapter.

17.62.090 - Nominated resource protections pending final decision.

- A. Subject to the time limits set forth in subsection B, any nominated resource proposed for consideration as a landmark or contributing resource shall be considered to be a landmark or contributing resource for purposes of Section 17.62.160 herein, and it shall be subject to the restrictions and protections of Section 17.62.160 as if it were a landmark or contributing resource. Any geographic area proposed for consideration as a historic preservation district shall be considered to be a historic preservation district for purposes of Section 17.62.160 herein, and the resources located within the proposed historic preservation district shall be subject to the restrictions and protections of Section 17.62.160 as if they were located within a historic preservation district.
- B. The restrictions of subsection A shall apply for a period of one hundred eighty (180) days from the date of a nomination by the Board of Supervisors or adoption by the commission of a resolution of intent to nominate a property as a landmark, a contributing resource or a property within a historic preservation district. After one hundred eighty (180) days have elapsed from the date of the initiation of designation, if the Board of Supervisors has not adopted an ordinance designating the nominated resource as a landmark, contributing resource or historic preservation district, the restrictions and protections established by subsection A shall no longer apply unless the Board of Supervisors has adopted an ordinance to extend the one hundred eighty (180) day limit to consider the nomination.

17.62.160 - Certificate of appropriateness.

A certificate of appropriateness is required for any alteration, relocation or demolition of a landmark, structure of merit or contributing resource within a historic preservation district. A certificate of appropriateness is also required for new construction on a site occupied by a landmark, structure of merit, contributing resource, or within a historic preservation district. Approval of such work shall be required even if no other permits or entitlements are required by the county. The issuance of a certificate of appropriateness is not required for preventative maintenance or interior work that does not affect the appearance of the exterior.

17.62.240 - County projects.

- A. Except as provided herein, the provisions of this chapter requiring hearing(s) before the commission or planning department shall apply to development projects involving, or requests for demolition or relocation of, landmarks, structures of merit or contributing resources which are owned by the county, including public projects within the Alameda County national historic landmark, historic preservation district; provided that the commission or planning department shall make a recommendation to the county Board of Supervisors or other county decision-making body, entity or person, rather than issuing a decision. When acting on county projects, the Board of Supervisors or other county decision-making body, entity or person shall apply the same standards, and make the same findings, required by this chapter for private projects.

- B. The Board of Supervisors may, by resolution or ordinance, exempt from review by the planning department or commission individual county projects or categories of county projects.

ALAMEDA COUNTY PARKS, RECREATION AND HISTORICAL COMMISSION

224 West Winton Ave., Room 111 · Hayward, California 94544-1215 · phone 510.670.5400 · www.acgov.org/cda

Jerry Caveglia, Chair
District 2

Submitted electronically via email

Linda Willis, Vice Chair
District 4

September 13, 2019

Al Minard
District 1

Jason Garrison, Environmental Project Manager
County of Alameda General Services Agency
1401 Lakeside Drive, Suite 800
Oakland, CA 94612
QIC: 26023

Annalee Allen
District 4

Kuldip Banga
District 2

RE: Draft EIR for the Whitecotton Cottage Demolition Project, State Clearinghouse Number 2019049101

Maria Magallon
District 3

Dear Mr. Garrison:

Maryalice Faltings
District 1

The Alameda County Parks, Recreation & Historical Commission (PRHC) submits the following remarks on the Draft EIR prepared for the *Whitecotton Cottage Demolition Project*, for the Alameda County General Services Agency. The subject building is located on the County-owned Fairmont Hospital Campus in Castro Valley and served as the residence for the facility's superintendent from its construction in 1903 into the 1950's. From the 1970's to the year 2000 the building was used as office space. It has remained vacant since 2000 and its condition has deteriorated significantly due to a lack of maintenance.

Piper McKnight
District 3

Our Commission is charged with overseeing and monitoring preservation efforts in Alameda County. Commission members are appointed by the Board of Supervisors and are selected for their knowledge and expertise in preservation-related issues. The PRHC has recognized the historical value of the Whitecotton Cottage for many years. The attached 2002 letter from the Commission to the Board of Supervisors is evidence of the Commission's long-term interest in preserving the structure. Given past interactions between the PRHC and GSA regarding the Whitecotton Cottage, the Commission was disappointed that GSA did not consult with commissioners or send a Notice of Availability directly to the Commission when the DEIR was released for public review and comment on July 17th.

The PRHC has reviewed the DEIR and offers the following comments:

- On page 3, the DEIR states that Alameda County has not identified any areas of known controversy for the proposed project and directs readers to a summary of the responses the County received to the Notice of Preparation (NOP) of the DEIR in the Introduction on page 9. On April 17, 2019, the NOP was distributed for a 30-day public comment period, ending on May 17, 2019. PRHC staff could find no record that the PRHC received the NOP, so the Commission did not have the opportunity to express concern regarding the proposed demolition project at that time.

- Subsection 1.2 on page 9 of the DEIR indicates that the only action by a decision-making body required for the demolition project is certification of the EIR and approval by Board of Supervisors. Sections 17.62.150 and 17.62.160 of the County's Historic Preservation Ordinance establishes a process for review of the proposed demolition or relocation of buildings or structures that are at least fifty years old. This process includes referral of the

proposed demolition of any structure found to be of potential historical significance to the PRHC for consideration of a Certificate of Appropriateness for the demolition. Section 17.62.240 of the Historic Preservation Ordinance further states:

17.62.240 - County projects.

- A. Except as provided herein, the provisions of this chapter requiring hearing(s) before the commission or planning department shall apply to development projects involving, or requests for demolition or relocation of, landmarks, structures of merit or contributing resources which are owned by the county, including public projects within the Alameda County national historic landmark, historic preservation district; provided that the commission or planning department shall make a recommendation to the county Board of Supervisors or other county decision-making body, entity or person, rather than issuing a decision. When acting on county projects, the Board of Supervisors or other county decision-making body, entity or person shall apply the same standards, and make the same findings, required by this chapter for private projects.
 - B. The Board of Supervisors may, by resolution or ordinance, exempt from review by the planning department or commission individual county projects or categories of county projects.
- The DEIR provides analysis of two project alternatives. Alternative 1 is the “no project” alternative. It assumes that the project site would remain in its current state and the house would be allowed to continue to deteriorate. Alternative 2 would include the rehabilitation and adaptive reuse of the cottage. The DEIR concludes that Alternative 1 is the environmentally superior alternative because it would avoid the loss of the historical resource. The Commission argues that Alternative 1 would result in the loss of the historical resource as the cottage would eventually collapse if it is allowed to continue to deteriorate. Alternative 2 is the only alternative that would not result in the loss of the building. The primary reason given for rejecting Alternative 2 is the cost of restoring the cottage, which is not a valid environmental consideration under CEQA.
 - Subsection 2.5 on page 24 of the DEIR states that the project objectives are to eliminate hazards currently associated with the project site, including structural hazards, the presence of hazardous materials, and attracting vandalism and other illicit activities; and to reduce the deferred maintenance burden and overall costs to the County. It should be noted that Alternative 2 presented in the DEIR, which would involve the restoration and reuse of the subject building, would also achieve the objective of eliminating the stated hazards.
 - The analysis of Alternative 2, which begins on page 40 of the DEIR, finds that implementation of Alternative 2 would result in slightly greater air quality impacts and greenhouse gas emissions, as well as increased traffic and construction noise, than the proposed demolition project. However, the analysis concludes that these impacts would still be less than significant, as they would be for the proposed project, but without the significant and unavoidable impact resulting from the loss of the historical resource.

The PRHC requests that GSA keep the Commission apprised of when the Final EIR for the demolition project will be available and when the project will be scheduled to go before the Board of Supervisors for approval and certification of the EIR so that the Commission has the opportunity to provide input to the Board.

Page 6 of the DEIR lists two measures to reduce the impact of the loss of this historic resource if the cottage were to be demolished. The first mitigation measure (CR-1) would require the County to undertake Historic American Building Survey (HABS) documentation of the building. The second mitigation measure (CR-2) would require the installation of an interpretive plaque at the site. If the Board of Supervisors approves the demolition of the cottage, the Commission requests to be consulted on the content of the documentation and the plaque.

In addition, on page 35 the DEIR mentions plans for the partial demolition of four structures at the Nike Missile Site on Fairmont Drive and notes that these structures have also been determined to be eligible for the California Register of Historical Resources. The Commission requests that the proposed demolition of these structures and any other county-owned structure that may be of historical significance be referred to the Commission as well.

Please contact Liz McElligott, Assistant Planning Director, Community Development Agency – Planning at (510) 670-6120 or Elizabeth.mcelligott@acgov.org if you have questions regarding these comments.

Sincerely,

Alameda County Parks, Recreation and Historic Commission



Jerry Caveglia, Chair



Linda L. Willis, Vice Chair



Al Minard, Commissioner



Annalee Allen, Commissioner



Kuldip Banga, Commissioner



Maria Magallon, Commissioner



Piper McKnight, Commissioner

cc: Paul Saftner, Constituent Liaison, Supervisor Nate Miley

State of California — The Resources Agency
 DEPARTMENT OF PARKS AND RECREATION
PRIMARY RECORD

Primary #
 HRI #
 Trinomial
 NRHP Status Code

Other Listings
 Review Code

Reviewer

Date

Page 1 of 4

*Resource Name or #: Fairmont White Cotton Cottage

P1. Other Identifier:

*P2. Location: Not for Publication Unrestricted

*a. County: Alameda

and (P2b and P2c or P2d. Attach a Location Map as necessary.)

*b. USGS 7.5' Quad: Hayward

Date:

T ; R ; ¼ of ¼ of Sec ; M.D. B.M.

c. Address: 15400 Foothill Blvd

City: San Leandro

Zip: 94578

d. UTM: Zone: 10 ; mE/

mN (G.P.S.)

Elevation:

e. Other Locational Data:

Assessor Parcel Number: 080A-0153-010

***P3a. Description:**

The White Cotton Cottage is a two-story, complex cross-gabled, shingle style house with a round tower. This roughly rectangular-plan house stands on the Fairmont Hospital grounds on the outskirts of San Leandro. It is clad in painted wood shingles and its roof is clad in asphalt shingles. The gable features flared projecting closed eaves. A dentil course runs below the pediment and continues beneath the horizontal eaves throughout the house. The windows throughout the house have wood sashes with a plain wood surround and sill. The predominate window type is double-hung with lamb tongues but many of the windows are boarded over.

On the southern façade, a full-width front gable forms a projecting pediment over an enclosed full-width porch below. The façade gable has a symmetrical pair of triple casement windows and a louvered rectangular vent above. The porch has shingled square column supports with a wood band running above. The porch appears to have been enclosed, as there are decorative panels to the sides of the entrance. Two concrete steps lead to the entrance from a front lawn, and four brick steps lead to the lawn from the road in front of the house.

*P3b. Resource Attributes: HP2, Single-family property

*P4. Resources Present: Building Structure Object Site District Element of District Other (Isolates, etc.)

P5a. Photo or Drawing



P5b. Description of Photo:
 View of the south façade;
 November 13, 2007

*P6. Date Constructed/Age and Sources:
 Historic Prehistoric Both
 Likely 1890s, coincident with hospital expansion; census records

*P7. Owner and Address:
 County of Alameda
 1221 Oak Street, Suite 536
 Oakland, CA 94610

*P8. Recorded by:
 Carey & Co., Inc.
 460 Bush Street
 San Francisco, CA 94108

*P9. Date Recorded:
 February 2008

*P10. Survey Type: Intensive

*P11. Report Citation: Carey & Co. "Intensive Survey of Fifty Properties in Unincorporated Alameda County." March 2008.

*Attachments: NONE Location Map Sketch Map Continuation Sheet Building, Structure, and Object Record
 Archaeological Record District Record Linear Feature Record Milling Station Record Rock Art Record
 Artifact Record Photograph Record Other (List):

BUILDING, STRUCTURE, AND OBJECT RECORD

Page 2 of 4

*NRHP Status Code 5S1

*Resource Name or # Fairmont White Cotton Cottage

B1. Historic Name: White Cotton Cottage

B2. Common Name:

B3. Original Use: Single-family home

B4. Present Use: Vacant

*B5. Architectural Style: Shingle

*B6. Construction History: Likely built during the 1890s, this residence underwent significant alterations in the late 1910s or early 1920s based on comparison of the 1917 and 1928 Sanborn maps of the Fairmont Hospital. After 1917 the southern façade was extended resulting in the addition of a wide (now enclosed) porch, flared gable and possibly the shed-dormer on the east elevation. The front entrance was likely originally placed on the southeast corner of the east elevation addition, which in 1917 was a porch. By 1928 the porch was filled in and the eastern addition was extended northward as well. The eastern portion of the north elevation gable was also extended between 1917 and 1928, this modification is visible in the asymmetrical roof line. The tower and the western elevation appear to be original, indicating that the shingles and dental course may also be original and were adequately matched when the house was altered.

*B7. Moved? No Yes Unknown Date:

Original Location:

*B8. Related Features: Fairmont Hospital grounds

B9a. Architect: Unknown

b. Builder: Unknown

*B10. Significance: Theme: hospital management, shingle style architecture Area: San Leandro/Fairmont

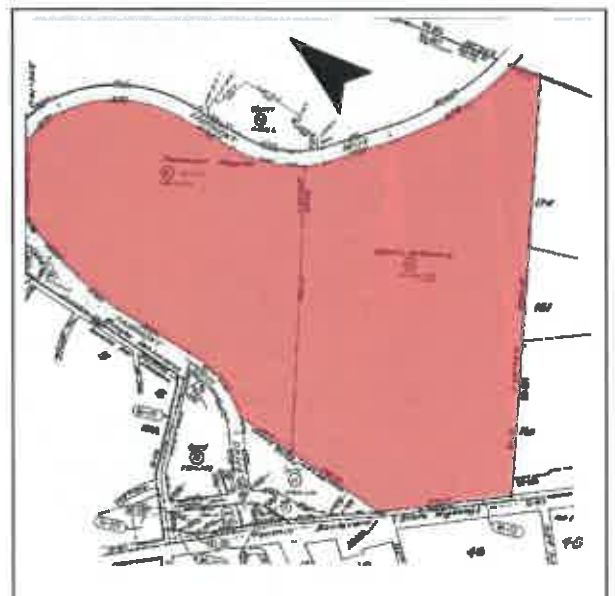
Period of Significance: 1890s to 1910s

Property Type: single-family home

Applicable Criteria: A, B, C

This residence appears to be locally important due to its association with management changes at the Fairmont Hospital, its association with the managers of Alameda County's main hospital during the late nineteenth century and early twentieth century, and as an example of Shingle-style homes with Queen Anne and Bay Area shingle tradition influences.

The Fairmont hospital was originally founded outside of San Leandro in 1864 and it was the only Alameda County hospital until the Arroyo Sanitarium opened in 1918. In 1894, Dr. William A. Clark reorganized the hospital and brought about many improvements and new buildings. According to Milton Henry Shutes in *A History of the Alameda County Public Medical Association*, Clark brought "a new life to the place and made a real hospital of it." Sloan argues that hospitals



B11. Additional Resource Attributes:

*B12. References:

See continuation sheet.

B13. Remarks:

*B14. Evaluator: Carey & Co., Inc.

*Date of Evaluation: February 2008.

*Recorded by: Carey & Co., Inc.

*Date: February 2008 Continuation Update

Continuation of P3a. Description:

The east elevation features a cross-gable with returned eaves. To the south of the gable there is a shed dormer with a pair of one-over-one double-hung windows. An internal brick chimney runs exterior to the cross-gable in front of the dormer. Below the gable there is a single-story projecting extension. The extension has a hipped roof, a small closed gable dormer with a vent shaft, and a boarded door that sits above three rounded concrete steps. The windows on this elevation are asymmetrical.

The north elevation features a front-facing gable with flared eaves over a porch and bay window. Unlike the façade, the elevation has an asymmetrical roofline indicating an alteration to the original gable. On its western side, the roofline mirrors the façade and descends as half of a full-width, flared gable. The gable extends over a cutaway porch, which has a single square, shingled post. On the eastern side of the north elevation, the gable projects into a shed roof. The second story has symmetrical one-over-one double hung windows, with a rectangular louvered vent above them. The first story features a shallow canted bay east of the porch and two windows east of the bay.

The west elevation features a central round tower flanked by shed dormers on the second story. The first story of the tower has three large windows. To the north, the curve of the tower straightens into the wall at the back of the cutaway porch, where there is a rear door. The second story of the tower features smaller awning windows set in a stucco band that runs from the dentil course under the eaves to a string course below the windows. At the line of the gable eave, the tower shingles have a decorative pattern: two rows of diamond shingles surmount a dentil pattern, which continues the line of the dentil course under the eaves. The tower has a faceted, flared, hipped roof. South of the tower, a shallow oriel with two scroll bracket supports extends under the overhanging eave.

Continuation of B10. Significance:

reorganized across the country during the 1880s and 1890s as "institutional reorganization occurred concurrently with technological and procedural changes." These changes included the specialization of hospital staff and changes in procedures that resulted in nurses and supervisors living at the hospital. It is likely that this house was constructed during this period and may have been Clark's home. The 1900 Census lists Clark's residence as the Alameda County Infirmiry, where he lived with his wife, son, daughter and two servants. Clark ran the hospital for seventeen years and was succeeded by Dr. W. A. Willis in 1910. The house is first shown in the 1917 Sanborn map of the hospital ground, were it is labeled "Supt's" indicating that it was the dwelling of the hospital's superintendent. By 1920 A. C. Jensen was the superintendent of the hospital. The 1930 Alameda County Great Register of Voters indicates that Andrew C. Jensen was still the superintendent and that he resided on the hospital grounds. Therefore, this house is associated with changes in hospital management during 1890s and the managers responsible for that change during the 1890s and early twentieth century.

The shingle style, popular from 1880-1900, includes wall cladding of continuous shingles; an asymmetrical façade with irregular, pitched roof line with intersecting cross-gables and multi-level eaves; and extensive porches. According to McAlester and McAlester the shingle style "aims for the effect of a complex shape enclosed within a smooth surface (the shingled exterior) which unifies the irregular outline of the house." This home also pulls from the local Bay Area shingle tradition, which includes the wide gable eaves. Longstreth states that the shingle-clad homes designed by turn-of-the-century architects in the Bay Area, such as Albert Farr, John White, and William Knowles, were responsible for "rustic expression became a ubiquitous feature of the regional landscape" and endowed "the Bay Area with a rich legacy of rustic architecture that stands somewhat apart from contemporary work in other locales." This home contains the character-defining features of the shingle style generally and the later modifications to the house appear to be inspired from the Bay Area shingle tradition.

*Recorded by: Carey & Co., Inc.

*Date: February 2008 Continuation Update

Continuation of B12. References:

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Longstreth, Richard *On the Edge of the World: Four Architects in San Francisco at the Turn of the Century*. Berkeley: University of California Press, 1983.

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McAlester, Virginia and Lee McAlester. *A Field Guide to American Houses*. New York: Alfred A. Knopf, 1985.

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Sandoval, John S. *The Rancho of Don Guillermo: A History of Hayward, Castro Valley and San Lorenzo, Volume I: The Early Years: 1843-1890*. Hayward, Calif.: Mt. Eden Historical Publishers, 1991.

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Sloane, David Charles. "Scientific Paragon to Hospital Mall: The Evolving Design of the Hospital, 1885-1994." *Journal of Architectural Education*, 48 (November 1994): 82-98.

United States Federal Census (1900, 1910, 1930). Ancestry.com, <http://www.ancestry.com>, accessed January, 2007.