

**MEMORANDUM OF AGREEMENT
AMONG
THE U.S. DEPARTMENT OF VETERANS AFFAIRS MEDICAL CENTER
MARION, ILLINOIS
AND THE
ILLINOIS STATE HISTORIC PRESERVATION OFFICER
REGARDING VAMC MARION PROJECT NO. 657-507 CORRECT SEISMIC DEFICIENCIES
BUILDING 14
(SHPO LOG # 006060925)**

WHEREAS, the U.S. Department of Veterans Affairs (VA) is a federal agency that operates the Marion VA Medical Center (VAMC) located in the City of Marion, Williamson County, Illinois (IL) and has identified seismic deficiencies in the boiler plant (Building 14) necessitating the building's demolition and replacement; and

WHEREAS, the Marion VAMC determined that the proposed demolition and replacement of Building 14 is a federal action that meets the definition of an undertaking, per 36 CFR § 800.16(y), and is the type of activity that has the potential to cause effects on historic properties, and therefore subject to Section 106 of the National Historic Preservation Act (NHPA) (54 USC § 306108) and its implementing regulations (36 CFR Part 800 – Protection of Historic Properties); and

WHEREAS, the Marion VAMC consulted with the IL State Historic Preservation Officer (SHPO), a Division of the Illinois Department of Natural Resources (IDNR), consistent with 36 CFR § 800.2(c)(1); and

WHEREAS, the Marion VAMC invited the following federally-recognized Indian tribes to be consulting parties, consistent with 36 CFR § 800.2(c)(2), on August 27th, 2025: the Kaw Nation of Oklahoma, the Ponca Tribe of Oklahoma, the Ponca Tribe of Nebraska, the Peoria Tribe, the Osage Nation, the Miami Nation, the Menominee Tribe of Wisconsin, and none have chosen not to participate in the consultation pursuant to 36 CFR§ 800.6(a)(1)(iii); and

WHEREAS, the Marion VAMC invited the following to be consulting parties, consistent with 36 CFR § 800.2(c)(3 through 5), on August 27th, 2025: Landmarks Illinois, Williamson County Historical Society, and City of Marion Municipal Planning Department, and none chose to participate in consultation; and

WHEREAS, the Marion VAMC notified the public of the undertaking and sought public comment through the Marion VAMC's public portal (<https://www.va.gov/marion-health-care/stories/public-notice-national-historic-preservation-act-public-comment-solicitation-for-project-657-507-correct-seismic/>) on August 27th, 2025, with no comments received; and

WHEREAS, the Marion VAMC, in consultation with the IL SHPO and consistent with 36 CFR § 800.4(a)(1), has determined the area of potential effects (APE) to be the boundary of the Marion Veterans Administration Hospital Historic District (Historic District) (Attachment A); and

WHEREAS, the Marion VAMC has identified the Historic District, listed on the National Register of Historic Places on November 20, 2012 (REF # 219300, Attachment B), as a historic property within the APE that may be affected by the undertaking consistent with 36 CFR § 800.4(b); and

WHEREAS, the Marion VAMC has determined that there are no archaeological resources within the APE that will be affected by the undertaking; and

WHEREAS, the Marion VAMC, in accordance with 36 CFR § 800.5(d)(2), has found the undertaking will have an adverse effect on the Historic District, as Building 14 is a contributing resource to the Historic District; and

WHEREAS, the Marion VAMC has consulted to resolve the adverse effect per 36 CFR § 800.6; and

WHEREAS, the Marion VAMC, in accordance with 36 CFR § 800.6(a)(1), has notified the Advisory Council on Historic Preservation (AChP) of the adverse effect finding, and on August 12, 2025 the AChP has chosen not to participate in the consultation pursuant to 36 CFR § 800.6(a)(1)(iii); and

NOW, THEREFORE, the Marion VAMC and the IL SHPO agree that the adverse effect will be resolved through the execution of this Memorandum of Agreement (MOA) pursuant to 36 CFR § 800.6(b)(1)(iv), and that the undertaking shall be implemented in accordance with the following stipulations in order to mitigate the adverse effects of this undertaking on historic properties.

STIPULATIONS

The Marion VAMC shall ensure that the following measures are carried out.

I. MITIGATION

A. Historic Illinois Buildings Survey (HIBS) Documentation

1. The Marion VAMC shall ensure that a professional who meets the Secretary of the Interior's Qualifications (36 CFR Part 61) will document Building 14 for the HIBS.
2. The recordation will follow the HIBS guidelines established by the IL SHPO, according to the specifications listed in Attachment C.
3. The professional will consult with the IL SHPO prior to the initiation of the work to ensure that expectations are understood.
4. The IL SHPO may approve alterations to the format and/or requirements of the HIBS, depending on the circumstances of the project.
5. Fieldwork, in the form of a site visit, draft photography, measurements, and final photography must take place before the Project may commence.
6. Upon completion of draft photography, the professional shall digitally submit the images and copies of field notes to the IL SHPO for a 15-day review and comment period.
7. Upon IL SHPO confirmation in writing that all of the final HIBS photographs to complete HIBS recordation have been collected, or after the comment period has closed and no comments have been received, the Project may commence.
8. The professional shall prepare and email a 95% draft of the HIBS recordation in .pdf format to the IL SHPO for a 15-day review and comment period.
9. When the IL SHPO accepts the 95% draft submission, in writing, the professional shall incorporate into the recordation any comments that the IL SHPO provides and complete the final documentation.
10. Upon completion of the final documentation, the Marion VAMC shall submit the following to the IL SHPO:
 - a. One archival clamshell of sufficient size to encapsulate the HIBS recordation.
 - b. One copy of the HIBS recordation, on archival materials, according to HIBS

specifications for deposit in the Abraham Lincoln Presidential Library and Museum.

- c. One digital record (download, link, flash drive, CD, or DVD) with the complete HIBS recordation for posting on the IL SHPO website.

B. Interpretive Installations

1. The Marion VAMC will install photographic documentation of the original boiler plant (i.e., printed, framed, and placed) in the hallway of the new boiler plant. Blueprints of the original plant will also be included.
2. The Marion VAMC will place a plaque at the entrance of the new boiler plant; with picture and description of original building.
3. The Marion VAMC will attempt to salvage a window from the original boiler plant, if feasible, and incorporate it in the photography exhibit as a picture frame.

II. DURATION

This MOA will expire if its terms are not carried out within five (5) years from the date of its execution. Prior to such time, the Marion VAMC may consult with the other signatories to reconsider the terms of the MOA and amend it in accordance with Stipulation VI AMENDMENTS below. The Marion VAMC shall notify the signatories as to the course of action it will pursue.

III. POST-REVIEW DISCOVERIES

If potential historic properties are encountered or unanticipated effects on historic properties found during implementation of the undertaking, the Marion VAMC shall immediately consult with the IL SHPO and federally recognized Indian tribes, as appropriate, and make reasonable efforts to avoid, minimize, or mitigate adverse effects to such properties. In the event of an unanticipated encounter of human remains or burials, the Marion VAMC must immediately stop work within 100 feet of the area, notify the Coroner, IL SHPO, and federally recognized Indian tribes, and comply with the Native American Graves Protection and Repatriation Act of 1990 (NAGPRA).

IV. MONITORING AND REPORTING

Each year following the execution of this MOA until it expires or is terminated, the Marion VAMC shall provide the IL SHPO a summary report detailing work undertaken pursuant to its terms. Such report shall include any scheduling changes proposed, any problems encountered, and any disputes and objections received in the VAMC's efforts to carry out the terms of this MOA.

V. DISPUTE RESOLUTION

Should any signatory to this MOA object at any time to any actions proposed or the manner in which the terms of this MOA are implemented, the Marion VAMC shall consult with the signatories to resolve the objection. If the signatories cannot agree regarding a dispute, the signatories shall:

- A. Forward all documentation relevant to the dispute, including any timely advice or comments regarding the dispute from the signatories and concurring parties and the Marion VAMC's proposed resolution, to the ACHP. The ACHP shall provide the Marion

VAMC with its advice on the resolution of the objection within thirty (30) days of receiving adequate documentation. Prior to reaching a final decision on the dispute, the Marion VAMC shall prepare a written response that takes into account any timely advice or comments regarding the dispute from the ACHP, signatories and concurring parties, and provide them with a copy of this written response. The Marion VAMC will then proceed according to its final decision.

- B. If the ACHP does not provide its advice regarding the dispute within the thirty (30) day time period, the Marion VAMC will make a final decision on the dispute and proceed accordingly. Prior to reaching such a final decision, VAMC shall prepare a written response that takes into account any timely comments regarding the dispute from the signatories and concurring parties to the MOA and provide them and the ACHP with a copy of such written response.
- C. The Marion VAMC's responsibility to carry out all other actions subject to the terms of this MOA that are not the subject of the dispute remain unchanged.

VI. AMENDMENTS

This MOA may be amended when such an amendment is agreed to in writing by all signatories. The amendment will be effective on the date a copy is signed by all of the signatories.

VII. TERMINATION

If any signatory to this MOA determines that its terms become impossible to carry out, that party shall immediately consult with the other signatories to attempt to develop an amendment per Stipulations V and VI above. If within thirty (30) days an amendment cannot be reached, any signatory may terminate the MOA upon written notification to the other signatories.

Once this MOA is terminated, and prior to work continuing on the undertaking, the Marion VAMC must either (a) execute a MOA pursuant to 36 CFR § 800.6 or (b) request, take into account, and respond to the comments of the ACHP under 36 CFR § 800.7. The Marion VAMC shall notify the signatories as to the course of action it will pursue.

VIII. COUNTERPARTS; FACSIMILE OR .PDF SIGNATURES

This MOA may be executed in counterparts, each of which shall be considered an original and together shall be one and the same MOA. A facsimile or .pdf copy of this MOA and any signatures thereon will be considered for all purposes as an original.

IX. DISTRIBUTION OF AGREEMENT

In order to meet the requirements of Section 106. 36 CFR § 800.6(b)(1)(iv), upon the execution of this MOA and prior to approving the undertaking, the Marion VAMC must transmit to the ACHP the executed MOA along with the documentation specified in Section 800.11(f).

EXECUTION of this MOA by the Marion VAMC and the IL SHPO and implementation of its terms evidence that the Marion VAMC has taken into account the effects of this undertaking on historic properties and afforded the ACHP an opportunity to comment.

[Signature Pages to follow]

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REGARDING VAMC MARION PROJECT NO. 657-507 CORRECT SEISMIC DEFICIENCIES
BUILDING 14,
(SHPO LOG # 006060925)

SIGNATORY

UNITED STATES DEPARTMENT OF VETERANS AFFAIRS

ZACHARY SAGE

Digitally signed by ZACHARY

SAGE

Date: 2026.01.08 15:03:39 -06'00'

Signature: _____ Date: January 8, 2026

Name: Zachary Sage

Title: Executive Director, Marion VA Healthcare System

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SIGNATORY

ILLINOIS DEPUTY STATE HISTORIC PRESERVATION OFFICER

By: *Carey L. Mayer* Date: 1/12/2026
Carey L. Mayer, AIA
Deputy State Historic Preservation Officer
Illinois Department of Natural Resources

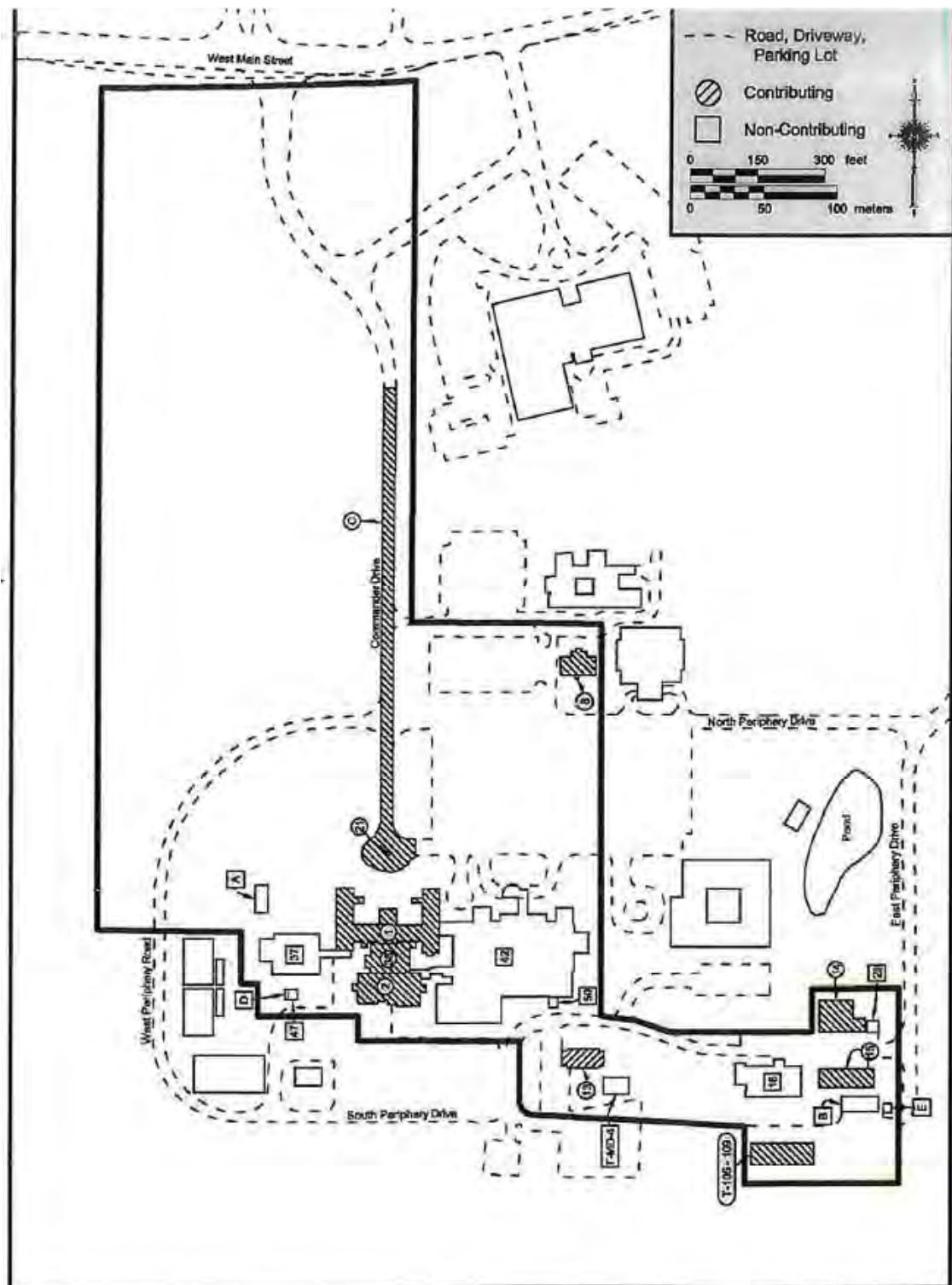


Figure 1 – National Historic Register Boundary (Building 14 is in the lower, right corner of the site).



Figure 2 – Area of Potential Effects and Proposed Conceptual Site Layout

United States Department of the Interior
National Park Service

National Register of Historic Places Registration Form

This form is for use in nominating or requesting determinations for individual properties and districts. See instructions in National Register Bulletin, *How to Complete the National Register of Historic Places Registration Form*. If any item does not apply to the property being documented, enter "N/A" for "not applicable." For functions, architectural classification, materials, and areas of significance, enter only categories and subcategories from the instructions. Place additional certification comments, entries, and narrative items on continuation sheets if needed (NPS Form 10-900a).

1. Name of Property

historic name Marion Veterans Administration Hospital Historic District

other names/site number Marion Veterans Affairs Medical Center / 219300

2. Location

street & number 2401 West Main Street

NA	not for publication
NA	vicinity

city or town Marion

state Illinois code IL county Williamson code 199 zip code 62959

3. State/Federal Agency Certification

As the designated authority under the National Historic Preservation Act, as amended,

I hereby certify that this X nomination request for determination of eligibility meets the documentation standards for registering properties in the National Register of Historic Places and meets the procedural and professional requirements set forth in 36 CFR Part 60.

In my opinion, the property X meets does not meet the National Register Criteria. I recommend that this property be considered significant at the following level(s) of significance:

 national X statewide local

Signature of certifying official>Title _____ Date _____

State or Federal agency/bureau or Tribal Government _____

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

Anne E. Haas _____ Signature of commenting official

August 22, 2012 _____ Date

Illinois Deputy State Historic Preservation Officer _____ Title _____ State or Federal agency/bureau or Tribal Government _____

4. National Park Service Certification

I hereby certify that this property is:

 entered in the National Register

 determined eligible for the National Register

 determined not eligible for the National Register

 removed from the National Register

 other (explain: _____)

Signature of the Keeper _____

Date of Action _____

Marion Veterans Administration Hospital Historic District
Name of Property

Williamson County, Illinois
County and State

5. Classification

Ownership of Property
(Check as many boxes as apply.)

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

Category of Property
(Check only one box.)

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

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

	Contributing	Noncontributing	
	7	7	buildings
	1	0	sites
	0	3	structures
	1	0	objects
	9	10	Total

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

Number of contributing resources previously listed in the National Register

United States Second Generation Veterans Hospitals

NA

6. Function or Use

Historic Functions

(Enter categories from instructions.)

Health Care / hospital

Current Functions

(Enter categories from instructions.)

Health Care / hospital

7. Description

Architectural Classification

(Enter categories from instructions.)

Late 19th and 20th Century Revivals : Egyptian

Revival

Materials

(Enter categories from instructions.)

foundation: Concrete

walls: Stucco

roof:

other: Terra Cotta

Marion Veterans Administration Hospital Historic District
Name of Property

Williamson County, Illinois
County and State

Narrative Description

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

Summary Paragraph

The Marion Veterans Administration (VA) Hospital Historic District, currently known as the Marion Veterans Affairs Medical Center, Marion, Illinois, is located at 2401 West Main Street, Marion, Illinois. The medical center property is a polygonal tract that is bounded to the west by Interstate 57, to the north by West Main Street, to the east by property owned by the State of Illinois and the city of Marion and suburban residential development, and to the south by a wooded, undeveloped tract. The medical center is located in Williamson County, approximately 1.5 miles west of downtown Marion. Located in a campus setting, much of the acreage administered by the Marion Veterans Affairs Medical Center has been developed, but portions of the property remain open and undeveloped, including sections in the northwest, south, and east. In these areas there remains a mix of open lawns, mature trees, a large pond for recreational use by the patients, and formal landscaping along Commander Drive, which serves as the main entrance drive from West Main Street. The main building is oriented to the north, while the current main entrance utilized by patients is through the outpatient clinical addition (Resource 42, 1998), which is located to the east of the main building (Resource 1, 1940) and is also oriented to the north. The original mission of the hospital was to provide general medical and surgical care to veterans, and the historic district preserves the general characteristics of this property sub-type. Characteristics of Period II (constructed from the late 1920s through to 1950) general medical and surgical Second Generation Veterans Hospitals include: initial acreage ranging between 50 and 100 acres located on elevated terrain adjacent to adequate roads for transportation; a central, monumental main building that served as the primary focus of the campus; usually only a single additional patient ward building, if any; in certain examples, because of the smaller design of general medical and surgical veterans hospitals in comparison to veterans neuropsychiatric hospitals, maintenance/utility services were incorporated into the dining hall/kitchen building to the rear of the main building rather than erecting separate buildings to house the station garage and boiler plant; residential quarters for staff members were distanced from the administration/patient care buildings within the campus to provide a separation between the residential and work environment; and the campus often included a recreational building, storehouse, and connecting corridors between the central core buildings. The Marion VA Hospital Historic District shares the majority of these characteristics with a few exceptions: the initial tract of land associated with the hospital was nearly 350 acres in size; the level topography did not allow the main building to be built on a substantial rise overlooking the other buildings, but it is located on a minimal rise within the property; no additional patient ward buildings were constructed during the period of significance; maintenance/utility services were located in separate buildings; and no recreational building was constructed for the hospital.¹ The large initial property size and locating the maintenance/utility functions in separate buildings can be attributed to the original concept that the hospital would also include a number of large domiciliary buildings to accommodate veterans, and thus the physical plant would be much larger. The polygonal-shaped property has been reduced from its original size and currently contains approximately 76 acres, according to the facilities management services of the Marion Veterans Affairs Medical Center;² the boundaries of the Marion VA Hospital Historic District are composed of approximately 47 acres of the parcel. The medical center property as a whole has lost integrity because of the enlargement/construction of parking lots and the introduction of single-story buildings after 1950 with large footprints and that do not share the same architectural style, materials, and massing as the buildings constructed within the period of significance. The historic district boundary was developed to include the significant historic resources and open space associated with the Marion VA Hospital, while excluding large parking lots and support and medical buildings constructed after the period of significance that are located to the north, south, and east of the historic district boundary. The historic district setting consists of level topography and includes nineteen resources: nine contributing and ten noncontributing. Contributing resources include those that retain integrity sufficient to convey the historic district's significance and were constructed during the historic district's period of significance (1940–1950). Contributing buildings within the historic district include a four-story

¹ "Negotiating For Acquisition of Property," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 7; The "Veterans Hospital Anniversary Edition" was published by the *Marion Daily Republican* on October 11, 1973, in recognition of the Marion VA Hospital's 31st anniversary. The anniversary edition is a compilation of stories pertaining to the VA hospital published over the years by the newspaper. The newspaper stories were compiled by the *Marion Daily Republican*'s reporter Flora Reilly. The anniversary edition provides many insights into the history of the Marion VA Hospital.

² United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

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Name of Property

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main building (Resource 1, 1940) with a three-story dental/medical building addition (Resource 38, 1988) along the rear elevation of the main building; the three-story dining hall building (Resource 2, 1940); residential quarters; the boiler plant; and the garage building, among others. The most notable alterations to the historic district after 1950 include the addition to the rear of the main building (Resource 1) and the introduction of single-story, flat-roof patient care/administration buildings with large footprints, such as the education building (Resource 37, 1979) and the outpatient clinical addition (Resource 42, 1998). The Marion VA Hospital began admitting patients in 1942 to provide general medical and surgical care to veterans. The design of the main building (Resource 1, 1940) is unique among Second Generation Veterans Hospitals, as it incorporates Egyptian Revival elements—southern Illinois is referred to as Egypt or Little Egypt. Other buildings within the historic district, most notably the two residential quarters, also exhibit Egyptian Revival decorative elements and stucco exteriors.

Narrative Description

The Marion Veterans Affairs Medical Center is located on level terrain within a campus setting to the west of downtown Marion. The parcel of land occupied by the Marion Veterans Affairs Medical Center originally encompassed 341 acres but has been reduced to approximately 76 acres over the years, with excess land having been transferred from VA ownership. The Marion VA Hospital was originally planned and constructed as a general medical and surgical hospital. Large domiciliary buildings were planned to be constructed in the future to expand the physical plant of the hospital, but this expansion never occurred.

The buildings of the Marion VA Hospital Historic District, constructed during the period of significance (1940–1950), appear to have been designed and have had construction overseen by the Veterans Administration's Construction Service. The main building exhibits numerous Egyptian Revival architectural elements, including terra cotta pilasters with polychrome lotus capitals, polychrome cavetto cornices, sun disks, and a pyramidal roof that caps the facade's projecting pavilion. The residential buildings also exhibit Egyptian Revival architectural elements, but to a lesser degree. The maintenance/utility buildings dating to the period of significance have flat roofs and are clad in stucco, but otherwise exhibit minimal decoration. The original construction drawings for the main building indicate the exterior of the building and the exterior decorative elements were designed by L. E. Twery, apparently one of the staff architects of the VA. While "L.E. Twery" appears on the construction drawings for the decorative elements of the main building, this name does not appear on the exterior construction drawings for the residential buildings; therefore, the attribution to Twery is unclear.³ The Egyptian Revival architectural style appears to have been utilized at the suggestion of Brigadier General Frank T. Hines, Administrator of the Veterans Administration (VA). The southern portion of Illinois had been referred to as Egypt or Little Egypt in the past, with its location near the confluence of the Mississippi and Ohio Rivers.⁴ The Veterans Bureau and VA would refer to an area's cultural and building traditions in the design of veterans' hospitals as they did at other locations, such as Alexandria, Louisiana; Tucson, Arizona; and Albuquerque, New Mexico. Although the majority of Second Generation Veterans Hospitals were constructed utilizing the Colonial Revival and Classical Revival architectural styles, regional influences were also taken into consideration. The Marion VA Hospital is the only Second Generation Veterans Hospital to exhibit the Egyptian Revival architectural style. Although the exteriors reflect an exotic architectural style, the massing and overall design of the Marion VA Hospital's buildings dating to the period of significance appear to follow the standardized models constructed at many Period II Second Generation Veterans Hospitals, such as the facade return wings of the main building and the rectangular massing of the residential and maintenance/utility buildings.

See Continuation Sheet (7.1)

³ United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois; Robert A. Ryan, Historic American Building Survey, "Veterans Administration Medical Center, Old State Route 13 West, Marion, Williamson County, Illinois, HABS No. IL-1155" (Dennett, Muessiq, Ryan and Associates, Ltd., 1989): 8, located on the World Wide Web on the Library of Congress website, "Historic American Buildings Survey," <http://lcweb2.loc.gov/pnp/habshaer/il/il0500/il0575/data/il0575data.pdf>, accessed February 2011.

⁴ United States Department of Veterans Affairs, *Marion VA Medical Center 60th Anniversary, 21 June 2002, Serving Veterans Since 1942* (United States Department of Veterans Affairs, 2002): n.p.; Robert A. Ryan, Historic American Building Survey, "Veterans Administration Medical Center, Old State Route 13 West, Marion, Williamson County, Illinois, HABS No. IL-1155" (Dennett, Muessiq, Ryan and Associates, Ltd., 1989): 6–7, located on the World Wide Web on the Library of Congress website, "Historic American Buildings Survey," <http://lcweb2.loc.gov/pnp/habshaer/il/il0500/il0575/data/il0575data.pdf>, accessed February 2011.

Marion Veterans Administration Hospital Historic District
Name of Property

Williamson County, Illinois
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8. Statement of Significance

Applicable National Register Criteria

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

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

Criteria Considerations

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

Property is:

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

Period of Significance (justification)

The period of significance for the Marion VA Hospital extends from 1940 to 1950. The period of significance begins with the construction of the facility and continues through 1950, the date of the last federal veterans hospital constructed utilizing the design philosophies developed for Second Generation Veterans Hospitals.

Criteria Considerations (explanation, if necessary)

NA

Areas of Significance

(Enter categories from instructions.)

Politics/Government

Health/Medicine

Architecture

Period of Significance

1940-1950

Significant Dates

NA

Significant Person

(Complete only if Criterion B is marked above.)

NA

Cultural Affiliation

NA

Architect/Builder

Construction Service, Veterans Administration

Twery, L. E.

Marion Veterans Administration Hospital Historic District
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Statement of Significance Summary Paragraph (Provide a summary paragraph that includes level of significance and applicable criteria.)

The Marion VA Hospital Historic District is significant for its association with the federal government's commitment to the health care of World War I and World War II veterans. As defined in the United States Second Generation Veterans Hospitals Multiple Property Form, the Marion VA Hospital Historic District is significant an excellent example of a Period II Second Generation general medical and surgical hospital utilizing a unique revivalist architectural style for this group of hospitals. Characteristics commonly associated with Period II (constructed from the late 1920s through 1950) general medical and surgical Second Generation Veterans Hospitals include: an initial tract of land between 50 and 100 acres that is located on elevated terrain near transportation routes such as roads and railroads; a central, monumental main building that served as the primary focus of the hospital campus; a single additional patient ward building, if any; because of the compact design of general medical and surgical veterans hospitals when compared with veterans neuropsychiatric hospitals, the attendants' quarters and maintenance/utility services such as the boiler house and station garage could be included in or attached to the dining hall/kitchen building, rather than completing separate buildings to house these functions; residential quarters for staff members were distanced from the administration/patient care buildings; and the facility often included a recreational and storehouse buildings, and corridors connecting the central core buildings. The Marion VA Hospital Historic District exhibits many of the characteristics associated with Period II general medical and surgical Second Generation Veterans Hospitals, although the historic district has a few variations, including: the facility initially owned a much larger tract of land than commonly found at other hospitals of this sub-type, because domiciliary buildings that would have accommodated over 1,000 veterans were originally expected to be constructed within the campus; the main hospital building is located on only a slight rise because of the level topography of the site; no separate recreational building was built for the facility; possibly because of the larger complex that was expected to be constructed, the maintenance/utility functions were placed in separate buildings rather than incorporated into the dining hall building.⁵ The Marion VA Hospital Historic District is eligible for listing in the National Register of Historic Places (NRHP) under Criterion A at the state level in the areas of Politics and Government because of the successful political campaign effort on the part of local organizations and the American Legion to secure the location of the federal hospital in Marion and its impact on the local community and veterans in southern Illinois and surrounding states. The Marion VA Hospital Historic District is also eligible under Criterion A in the areas of Health and Medicine at the state level because of its role in the mission of the federal government, through the VA, to provide general medical and surgical care to the nation's veterans of World War I and World War II. The Marion VA Hospital Historic District is also eligible under Criterion C in the area of Architecture at the state level because the Marion VA Hospital is an intact example of a Period II Second Generation Veterans Hospital and the only example utilizing the Egyptian Revival architectural style. The use of cavetto cornice lines and entry heads; lotus capitals; tall, straight-headed windows; smooth wall finishes; polychromatic detailing; and the dominant, projecting pavilion of the main building (Resource 1, 1940) capped by a pyramidal roof reflects the influence of the Egyptian Revival architectural style. The Marion VA Hospital Historic District is additionally significant for its monumental main building, which serves as the focal point of the historic district. The Marion VA Hospital Historic District also exhibits standardized building designs that were incorporated into the campuses of Period II Second Generation Veterans Hospitals. The design of the main building (Resource 1, 1940) shares similarities to main buildings located at other Period II Second Generation Veterans Hospitals, such as Tuscaloosa, Alabama; Lexington, Kentucky; and Lincoln, Nebraska. While similar examples of Period II main buildings utilize other types of exterior ornamentation, such as the Classical Revival architectural style, the use of the Egyptian Revival architectural style is unique to the Marion facility. The staff residential quarters and maintenance/utility buildings dating to the period of significance of the Marion VA Hospital Historic District are also similar in design and massing to buildings with identical functions at other Period II facilities, except for the differences in roof designs and ornamentation because of the different architectural styles utilized

⁵ "More Cutbacks in Original Plans," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 7; Robert A. Ryan, Historic American Building Survey, "Veterans Administration Medical Center, Old State Route 13 West, Marion, Williamson County, Illinois, HABS No. IL-1155," (Dennett, Muessig, Ryan and Associates, Ltd., 1989), 5-6, located on the World Wide Web on the Library of Congress website, "Historic American Buildings Survey," <http://lcweb2.loc.gov/pnp/habshaer/il/il0500/il0575/data/il0575data.pdf>, accessed February 2011.

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for these buildings at various locations. The construction of these similar buildings at varying sites throughout the nation demonstrates the VA's use of standardized designs for Period II veterans hospitals. Construction began on the Marion VA Hospital in 1940, and it was designated a general medical and surgical hospital serving veterans in southern Illinois and surrounding states. The historic district continues to retain characteristics of this hospital sub-type. The use of the Egyptian Revival architectural style creates a cohesive design for the historic district. The period of significance and assessment of contributing and noncontributing resources for this nomination are based on the historic district's significance within the historic contexts developed in the United States Second Generation Veterans Hospitals Multiple Property Documentation Form (MPDF). Resources constructed after 1950, and thus considered noncontributing within this nomination, may possess significance under themes not fully developed as part of the MPDF. Resources located within the medical center campus may be eligible or contributing for other associations or contexts under National Register Criteria A-D, or recent buildings/structures may be eligible under Criteria Consideration G, for resources of exceptional importance that are less than 50 years of age.

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

The period of significance for the Marion VA Hospital Historic District extends from 1940 to 1950. The period of significance begins with the construction of the facility and continues through 1950, the date of the last federal veterans hospital constructed utilizing the design philosophies developed for Second Generation Veterans Hospitals. The Marion VA Hospital Historic District is an excellent example of a Period II Second Generation Veterans Hospital that retains characteristics of the general medical and surgical sub-type and utilizes an exterior architectural style unique among the Second Generation Veterans Hospitals typology.

See continuation Sheet (8.17)

Developmental history/additional historic context information (if appropriate)

See Continuation Sheet (8.24)

9. Major Bibliographical References

Bibliography (Cite the books, articles, and other sources used in preparing this form.)

See Continuation Sheet (9.35)

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 # IL-1155
 recorded by Historic American Engineering Record # _____
 recorded by Historic American Landscape Survey # _____

Primary location of additional data:

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

Name of repository: Veterans Affairs Historic Preservation Office and the Marion VA Medical Center Public Affairs Officer

Historic Resources Survey Number (if assigned): 219300

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10. Geographical Data

Acreage of Property Approximately 47 acres
(Do not include previously listed resource acreage.)

UTM References

(Place additional UTM references on a continuation sheet.)

1	16	327440	4177408	12	16	327881	4176703
	Zone	Easting	Northing		Zone	Easting	Northing
2	16	327656	4177414	13	16	327736	4176711
	Zone	Easting	Northing		Zone	Easting	Northing
3	16	327654	4177046	14	16	327728	4176761
	Zone	Easting	Northing		Zone	Easting	Northing
4	16	327783	4177044	15	16	327618	4176762
	Zone	Easting	Northing		Zone	Easting	Northing
5	16	327783	4176778	16	16	327618	4176779
	Zone	Easting	Northing		Zone	Easting	Northing
6	16	327830	4176767	17	16	327550	4176779
	Zone	Easting	Northing		Zone	Easting	Northing
7	16	327927	4176767	18	16	327550	4176801
	Zone	Easting	Northing		Zone	Easting	Northing
8	16	327927	4176796	19	16	327538	4176801
	Zone	Easting	Northing		Zone	Easting	Northing
9	16	327986	4176797	20	16	327538	4176836
	Zone	Easting	Northing		Zone	Easting	Northing
10	16	327986	4176664	21	16	327440	4176838
	Zone	Easting	Northing		Zone	Easting	Northing
11	16	327881	4176663				
	Zone	Easting	Northing				

Verbal Boundary Description (Describe the boundaries of the property.)

The historic district boundary of the nominated property is delineated by the rectangular polygon in a solid black line on a portion of the Marion, Illinois, topographic map on page 39. The boundary is also indicated by a rectangular polygon on the enclosed USGS Marion, Illinois, topographic quadrangle map. The UTM reference points, stated in NAD 27, are provided above and on the enclosed USGS topographic quadrangle map. The boundary begins at the northwest corner of the property boundary of the Marion Veterans Affairs Medical Center, along the south right-of-way of West Main Street and the east right-of-way of Interstate 57, at UTM E 327440 N 4177408, then extends to the east along the southern right-of-way for West Main Street, crossing the recently constructed new entrance drive to the facility, for approximately 700

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feet to the northeast corner of the property boundary at UTM E 327656 N 4177414. Picking up at the northeast property boundary, adjacent to the west edge of a sidewalk that extends southward parallel to the original main entrance drive, the historic district boundary extends to the south for approximately 1,160 feet along the west edge of the sidewalk to UTM E 327654 N 4177046, then to the east for approximately 450 feet along the south edge of a drive that passes to the north of the nurses' quarters (Resource 8) to UTM E 327783 N 4177044. The historic district boundary then extends to the south for approximately 875 feet, passing the east elevation of Resource 8, through a parking lot, and to the east of Resource 42, to the north edge of a drive at UTM E 327783 N 4176778, then following the north edge of the drive as it curves to the southeast-east for approximately 175 feet to UTM E 327830 N 4176767. The historic district boundary then extends to the east along the north edge of a parking lot for approximately 290 feet to UTM E 327927 N 4176767. The boundary then extends to the north for approximately 100 feet to UTM E 327927 N 4176796, then to the east for approximately 210 feet to the west edge of East Periphery Road at UTM E 327986 N 4176797. The historic district boundary then extends to the south along the west edge of East Periphery Road and beyond into a lawn for approximately 415 feet to UTM E 327986 N 4176664, then to the west for approximately 360 feet, passing to the south of Resource T-105 to T-109, to UTM E 327881 N 4176663, then to the north for approximately 100 feet, passing the west elevation of the Quonset huts, to UTM E 327881 N 4176703 along the north edge of South Periphery Road. The historic district boundary turns to the west, following the north edge of South Periphery Road for approximately 480 feet to a curve in the road, directly north of the helipad, at UTM E 327736 N 4176711, then turning to the north along the east edge of a drive for approximately 150 feet to the south edge of a sidewalk at UTM E 327728 N 4176761. The boundary then extends to the west for approximately 370 feet along the south edge of a sidewalk and continues through a portion of a parking lot to UTM E 327618 N 4176762, then turns to the north for approximately 30 feet to UTM E 327618 N 4176779, then continues to the west for approximately 200 feet through a parking lot and to the east edge of a parking lot located to the north of Resource T-MD-1 to UTM E 327550 N 4176779. The historic district boundary then turns to the north and extends for approximately 90 feet to the south edge of a sidewalk connecting two new modular buildings and Resource 37 at UTM E 327550 N 4176801, then turns to the west and continues along the south edge of the sidewalk for approximately 45 feet to UTM E 327538 N 4176801, then turning to the north and extending approximately 110 feet, passing the west elevation of Resource 37, to UTM E 327538 N 4176836. The historic district boundary then extends to the west for approximately 330 feet to the western property line of the medical center, which is along the Interstate 57 right-of-way, to UTM E 327440 N 4176838. The historic district boundary then extends to the north along the medical center's property line (the right-of-way for Interstate 57) for approximately 1,850 feet to the beginning, encompassing approximately 47 acres.

Boundary Justification (Explain why the boundaries were selected.)

The boundary of the Marion Veterans Administration (VA) Hospital Historic District, currently known as the Marion Veterans Affairs Medical Center, Marion, Illinois, encompasses approximately 47 acres of the approximately 76 acres currently administered by the VA, according to the facilities management services of the Marion Veterans Affairs Medical Center.⁶ While significantly smaller than the historic property boundary, the polygonal-shaped historic district includes the major resources historically associated with the hospital, including the focal points of the historic district (the main building and flag pole, Resources 1 and 21). The Marion VA Hospital Historic District boundary follows clearly defined manmade features that surround the historic resources.

The Marion VA Hospital originally consisted of approximately 341 acres but was reduced over the years to its current size of approximately 76 acres. Of the total acreage under the medical center's control, the historic district boundary encompasses approximately 47 acres and nineteen resources; nine of the resources are considered contributing to the historic significance of the district. Contributing resources include those that retain integrity to convey the historic district's significance and that were constructed during the period of significance. The period of significance for the Marion VA Hospital Historic District in Marion, Illinois, extends from the initial construction of the hospital in 1940 through 1950, the date of the last federal veterans hospital constructed utilizing the design philosophies developed for Second Generation Veterans Hospitals.

⁶ United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

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The historic district boundary was delineated to not only include the significant historic buildings, constructed with stucco exteriors and incorporating Egyptian Revival architectural style decorative elements, associated with the Marion VA Hospital Historic District, but also the majority of the remaining open space and site elements associated with the Marion VA Hospital, including mature trees and vegetation, the lawn area within the northern portion of the historic district, and the linear main entrance drive. The majority of these elements are located to the north of the main building and flag pole (Resources 1 and 21, both 1940). Excluded from the historic district boundary are buildings, structures, drives, and parking lots that date to after the period of significance, such as: large parking lots located to the north, east, and south of the historic district boundary; the large pond located to the north and east of the historic district boundary; and buildings and structures added to the medical center's property after 1950 that are located to the north, east, south and west of the southern portion of the historic district, such as: the replacement water tower; modular office buildings; recent buildings constructed near the nurses' quarters (Resource 8, 1940); the community living center, with its large footprint; and a storage building located to the west of the Quonset huts (Resource T-105 through T-109).

11. Form Prepared By

name/title Holly Higgins/Architectural Historian, Robert C. Whetsell/Historian, and Trent Spurlock/Architectural Historian

organization Cultural Resource Analysts, Inc. date March 29, 2012

street & number 151 Walton Avenue telephone 859-252-4737

city or town Lexington state KY zip code 40508

e-mail

Additional Documentation

Submit the following items with the completed form:

- **Maps:** A USGS map (7.5 or 15 minute series) indicating the property's location.
- A Sketch map for historic districts and properties having large acreage or numerous resources. Key all photographs to this map.
- **Continuation Sheets** (39-44)
- **Additional Items:** (Check with the SHPO or FPO for any additional items.)

Photographs:

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

Name of Property:

City or Vicinity:

County: State:

Photographer:

Date Photographed:

Description of Photograph(s) and number:

See Continuation Sheet (45)

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Property Owner:

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

name _____

street & number _____

telephone _____

city or town _____

state _____

zip code _____

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

Estimated Burden Statement: Public reporting burden for this form is estimated to average 18 hours per response including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding this burden estimate or any aspect of this form to the Office of Planning and Performance Management, U.S. Dept. of the Interior, 1849 C Street, NW, Washington, DC.

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Even before the Marion VA Hospital was constructed in 1940, the local community rallied to promote the city as the site for a veterans hospital to be constructed in southern Illinois. Members of Marion's numerous civic organizations formed the Marion Cooperative Club to meet with government representatives when they visited Marion.⁷ American Legion members began a letter writing campaign to all U.S. Congressional representatives of Illinois, Kentucky, Indiana, and Missouri regarding the need for a VA hospital in southern Illinois.⁸ On April 11, 1939, Marion was selected as the site of the new VA hospital.⁹ On August 19, 1939, the federal government agreed to purchase the 341-acre site to the west of downtown Marion.¹⁰ However, the hospital was not opened to accept patients until the summer of 1942. This delay occurred for a number of reasons, including an alteration to the initial plans for the hospital to incorporate the Egyptian Revival architectural style buildings, higher than expected construction bids, material shortages brought about by the outbreak of World War II in Europe that caused a redirection of materials to defense production, and continued increases in construction costs associated with the nation's entry into World War II.¹¹

As stated previously, the original plans for the facility called for construction of the main building (Resource 1, 1940) and the flag pole (Resource 21, 1940) at the end of the main entrance drive (Resource C). A nurses' quarters (Resource 8, 1940) was built to the northeast of the main building and an attendants' quarters (Resource 13, 1940) was located to the southeast of the main building. A narrow connecting corridor extended from the rear (south) of the main building to the north elevation of the dining hall building (Resource 2, 1940). Maintenance/utility buildings, such as the storehouse, garage, boiler house (Resources 16, 15, and 14, all 1940), and the chimney stack associated with the boiler house, were grouped together and distanced to the southeast of the main building. A water tank/tower was also constructed at this time, located to the south-southwest of the storehouse. Future buildings considered during the initial construction of the facility included large wing additions to either side of the main building (Resource 1); four large barracks (or domiciliary) buildings forming a partial courtyard to the south of the dining hall building (Resource 2); a dining hall/auditorium building that was to be located directly south of the existing dining hall building (Resource 2); additions to the nurses' quarters (Resource 8, 1940); three duplex quarters that were to be located north of the nurses' quarters (Resource 8); two large garages to serve the duplexes and nurses' quarters; and a laundry building in the group of maintenance/utility buildings.¹² Rising costs associated with the hospital lead to the elimination of these buildings during the initial construction program.¹³

⁷ "Forms Marion Cooperative Club," "Veterans Hospital Anniversary Edition," *Marion Daily Republican*, October 11, 1973, 3.

⁸ "Washington Flooded With Letters and Telegrams," "Veterans Hospital Anniversary Edition," *Marion Daily Republican*, October 11, 1973, 5.

⁹ "Ten Year Fight for New Veterans Hospital Ends in Victory for Marion," "Veterans Hospital Anniversary Edition," *Marion Daily Republican*, October 11, 1973, 6

¹⁰ "Negotiating For Acquisition of Property," "Veterans Hospital Anniversary Edition," *Marion Daily Republican*, October 11, 1973, 7.

¹¹ Robert A. Ryan, Historic American Building Survey, "Veterans Administration Medical Center, Old State Route 13 West, Marion, Williamson County, Illinois, HABS No. IL-1155," (Dennett, Muessig, Ryan and Associates, Ltd., 1989), 8, located on the World Wide Web on the Library of Congress website, "Historic American Buildings Survey," <http://lcweb2.loc.gov/pnp/habshaer/il/il0500/il0575/data/il0575data.pdf>, accessed February 2011.

¹² United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

¹³ "More Cutbacks In Original Plans," "Veterans Hospital Anniversary Edition," *Marion Daily Republican*, October 11, 1973, 7; Robert A. Ryan, Historic American Building Survey, "Veterans Administration Medical Center, Old State Route 13 West, Marion, Williamson County, Illinois, HABS No. IL-1155" (Dennett, Muessig, Ryan and Associates, Ltd., 1989): 8-9, located on the World Wide Web on the Library of Congress website, "Historic American Buildings Survey,"

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The VA originally owned nearly 350 acres associated with the Marion VA Hospital. It was expected that the hospital would utilize additional portions of the property during any future expansion. This expansion did not occur and during the 1950s the VA began to transfer ownership of property it determined to be excess to the hospital's needs. This reduction in acreage included transfers to an individual, the State of Illinois, and other entities. According to various site plan maps located in the files of the Facilities Management Services, nearly 137 acres in the western portion of the original property were transferred to an individual in 1950; over 27 acres were transferred to the west of the current property boundary for Interstate 57; 61 acres south of the present property boundary were transferred in 1965 to the County Board of School Trustees; and nearly 12 acres north of the nurses' quarters (Resource 8, 1940) were deeded to the State of Illinois.¹⁴ The Marion Veterans Affairs Medical Center currently retains control of approximately 76 acres according to the Facilities Management Services of the Marion Veterans Affairs Medical Center.¹⁵

Nearly all built resources are located in the southern half of the historic district, which encompasses approximately 47 acres of the total 76-acre parcel owned by the Department of Veterans Affairs. Typically the buildings of general medical and surgical Second Generation Veterans Hospitals are clustered into three groups according to their original function. Because only a few buildings were constructed during the period of significance, two separate groups of buildings can be identified within the historic district: the central core group and the maintenance/utility group of buildings. The third group commonly associated with Second Generation Veterans Hospitals is the residential group, usually distanced from the other two groups to provide privacy to the staff members but also in close proximity for the employees to easily walk to work. At the Marion VA Hospital only two residential quarters buildings were erected, the nurses' and attendants' quarters (Resources 8 and 13, both 1940), although others were initially planned. These two residential quarters are spatially separated, with one located approximately 100 feet southeast of the outpatient clinical addition (Resource 42, 1998) and the other located approximately 500 feet north of the outpatient clinical addition. Sometime after World War II four temporary barracks buildings were erected within the historic district, on the south side of the drive between the attendants' quarters and the storehouse building (Resources 13 and 16, both 1940). According to a plat plan of the facility drawn prior to 1955 and revised in 1964, these barracks were used as apartments. It is unclear when these four temporary buildings were removed.

The Second Generation Veterans Hospitals developed a hierarchy of building ornamentation depending on the use and public visibility of the building within a campus. This hierarchy became even more apparent with the Period II Second Generation Veterans Hospitals; the monumental main building served as the public focus of the hospital campus. The main building at the Marion VA Hospital Historic District exhibits the most Egyptian Revival decorative elements of the buildings within the historic district. The ornamentation of the main building includes: terra cotta pilasters with polychrome lotus capitals, cavetto cornices painted in bright colors with designs reminiscent of ancient Egyptian motifs, terra cotta sun disks along the parapet wall of the roof, and a substantial pyramidal roof over the projecting pavilion of the facade. The two residential quarters buildings (Resources 8 and 13) exhibit fewer decorative features, such as terra cotta door surrounds, a winged sun disk element over an entry, cavetto cornices with vertical leaf designs, sun disks along the parapet walls, and stucco exteriors. The buildings of the maintenance/utility group dating to the period of significance display minimal exterior ornamentation.

Two buildings within the central core group of the Marion VA Hospital Historic District date to the period of

<http://lcweb2.loc.gov/pnp/habshaer/il/il0500/il0575/data/il0575data.pdf>, accessed February 2011.

¹⁴ United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

¹⁵ United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

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significance, including: the main building (Resource 1, 1940) and the dining hall building (Resource 2, 1940) located to the rear (south) of the main building. Also dating to the period of significance is the flag pole (Resource 21, 1940), located directly in front of the main building within the circular southern terminus of the main entrance drive (Resource C, 1940). A number of resources have been constructed after 1950 within the historic district's central core group of buildings, including: the three-story dental/medical building addition (Resource 38, 1988), an addition to the rear of the main building replacing the original connecting corridor to the dining hall building; the education building (Resource 37, 1979), a single-story, flat-roof building with a large footprint located to the west of the main building; and the outpatient clinical addition (Resource 42, 1998), a one-story building with an even larger footprint located to the east of the main building (Resource 1) and the dining hall building (Resource 2). Smaller buildings and structures have also been constructed within the central core after the period of significance, such as the picnic pavilion (Resource A, circa 1993), and two electric generators (Resources 47, 1978; and F, 2011). The larger resources of the central core are oriented to the north, facing West Main Street. The flag pole and the monumental main building (Resources 21 and 1, both 1940) continue to serve as the visual focus of the historic district.

The maintenance/utility group of buildings is located to the east-southeast of the central core group of buildings. As with other examples of Second Generation Veterans Hospitals, the original buildings of this group are aligned along both sides of a drive. The maintenance/utility group, distanced from the central core to be unobtrusive to the main building, which is the primary focus of the facility, is composed of three resources dating to the period of significance. The three buildings that were built during the initial construction phase of the hospital include the boiler house, garage building, and the storehouse building (Resources 14–16, all 1940). The five connected Quonset huts (Resource T-105 through T-109, 1947), located to the south of the storehouse building, were also erected during the period of significance. Smaller buildings/structures have been added to the southeastern portion of the historic district within the maintenance/utility group after 1950 and include: the incinerator (Resource 23, 1952); the engineering offices and storage building (Resource B, 1995); and the electric switch station (Resource E, 1997). The three maintenance/utility buildings associated with the initial construction of the facility (boiler house, garage and storehouse buildings) exhibit minimal exterior decorative elements in comparison to the Egyptian Revival characteristics of the main and residential buildings. Although the three buildings of this group are much less ornate, they continue the original architectural scheme of the historic district through their flat roofs, stucco exteriors, and in certain examples, stringcourses clad in stucco.

Although the majority of the southern-southeastern portion of the historic district has been developed, a substantial portion of the north and west portions of the district, west of the main entrance drive (Resource C, 1940) remains an open lawn with mature trees. This open lawn is also found to the immediate northwest of the main building (Resource 1). This portion of the historic district, which includes the open lawn, extends to the north to the right-of-way of West Main Street, to the east along the medical center's property that is delineated by a sidewalk to the immediate east of the main entrance drive (Resource C, also known as Commander Drive), and to the west along the property line with the right-of-way of Interstate 57.

Modifications to the historic district after 1950 include the recent realignment of the northern portion of the main entrance drive (Resource C) to intersect West Main Street across from the northern on/off ramp of Interstate 57; the construction of large parking lots to the west of the nurses' quarters (Resource 8) and to the south of the nurses' quarters (Resource 8) and north of the outpatient clinical addition (Resource 42, 1998); the addition of the West Periphery Road to the west of the main entrance drive (Resource C) as it curves to the south, continuing west of the education building (Resource 37) and outside the historic district; the reconfiguration of the internal circulation system because of the construction of the outpatient clinical addition (Resource 42, 1998), necessitating the construction of the Periphery Road, which effectively encompasses the southern developed portion of the medical center's property; and the construction of buildings/structures within the historic district after 1950, such as the dental/medical building addition to the rear of the main building (Resource 1 and 38, 1940

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and 1988), the education building (Resource 37, 1979), the outpatient clinical addition (Resource 42, 1998), the picnic pavilion (Resource A, circa 1993), and the modular engineering building (Resource T-MD-4, 2009). The seismic stabilization modifications to the main building and the dining hall building (Resources 1 and 2), including the stairwell additions to the facade of the main building, have also impacted the historic district. Buildings/structures dating to the period of significance within the historic district have also been removed. Buildings/structures that are known to have been removed include the four temporary barracks (apartment) buildings that were located between the attendants' quarters and the storehouse building (Resources 13 and 16); a temporary machine shed that was located to the south of the garage building (Resource 15, 1940); and the chimney stack associated with the boiler house (Resource 14). Site plan maps of the campus also indicate that a gate house was demolished and a five-bay garage was located to the south of the garage building (Resource 15). Also indicated on a 1941 site plan map is a residence with outbuildings located to the immediate west of the main entrance drive. This residence and outbuildings, which predated the hospital, appears to have been removed early in the hospital campus's development.¹⁶

The entire medical center property has diminished integrity; therefore, only a portion of the property is included within the historic district. The historic district includes the major resources and landscape elements historically associated with the Marion VA Hospital, including the focal points of the historic district (the main building and flag pole). Construction of buildings and structures located outside the historic district but within the Marion Veterans Affairs Medical Center property includes construction of a modular building containing administrative offices (2005) and the chiller plant (1998) to the south-southwest of the historic district; the addition in 2011 of two modular buildings for administrative offices to the west-southwest of the education building (Resource 37, 1979); the creation of a staff parking lot to the south of the chiller plant and enlargement of a parking lot to the south of the dining hall building (Resource 2, 1940) and the outpatient clinical addition (Resource 42, 1998); creation of a helipad to the southeast of the attendants' quarters (Resource 13, 1940); a parking lot to the south of the engineering building (Resource T-MD-4, 2009); the replacement water tower constructed in the 1980s that is located to the west of the Quonset huts (Resource T-105 through to T-109, 1947); a garage/storage building to the west of the Quonset huts; the recent construction of the Illinois American Veterans (AMVET) building and another large building to the east and north of the nurses' quarters (Resource 8, 1940); the large parking lot to the south of the nurses' quarters that extends eastward beyond the historic district boundary; the community living center (1985), with its large footprint, and the modular building (2009) located to the east of the outpatient clinical addition (Resource 42, 1998); and the introduction of a large pond and picnic pavilion located to the east of the community living center (1985). These post 1950 buildings, structures, and parking lots were excluded from the historic district because they do not relate to the Marion VA Hospital's period of significance.

Currently the area surrounding the Marion Veterans Affairs Medical Center property is used for commercial, residential, and transportation purposes. The area to the east of the medical center property has been developed with residential properties and a State of Illinois office building. To the north is West Main Street with commercial properties to the northeast and immediately north of the medical center property is the northbound on/off ramps for Interstate 57. To the west of the property is Interstate 57 and a wooded area is located to the south of the Marion Veterans Affairs Medical Center property.

¹⁶ United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

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Individual Resource Inventory

Historic names and uses for individual resources were used whenever possible. The dates of construction and details regarding the former use of the following buildings are from the National Register of Historic Places Determination of Eligibility dated 1980 and from information provided by the medical center's facilities management services department.¹⁷ The numerical designations of the resources were assigned at the time of their construction by the VA and the Department of Veterans Affairs. Information on the current uses of the resources was provided by the facilities management services department of the Marion Veterans Affairs Medical Center, Marion, Illinois. The "circa" dates of construction and letter designations were provided by the surveyors for resources without construction dates or numerical labels. All resources that were present during the period of significance and that retain integrity are considered contributing resources to the historic district. Minor resources that are not substantial in size and scale were not included in the resource count.

The period of significance and assessment of contributing and noncontributing resources for this nomination are based on the historic district's significance within the historic contexts developed in the United States Second Generation Veterans Hospitals Multiple Property Documentation Form (MPDF). Resources constructed after 1950, and thus considered noncontributing within this nomination, may possess significance under themes not fully developed as part of the MPDF. Resources located within the medical center property may be eligible or contributing for other associations or contexts under National Register Criteria A-D, or recent buildings/structures may be eligible under Criteria Consideration G, for resources of exceptional importance that are less than 50 years of age.

Resource #	Date of Construction	Contributing (C) / Noncontributing (N/C)	Original or Current Use
1 and 38	1940, 1988	C	Main Building and Dental/Medical Building Addition
2	1940	C	Dining Hall Building
8	1940	C	Nurses' Quarters
13	1940	C	Attendants' Quarters
14	1940	C	Boiler House
15	1940	C	Garage Building
16	1940	NC	Storehouse Building
21	1940	C	Flag Pole
23	1952	NC	Incinerator
37	1979	NC	Education Building
42 and 50	1998	NC	Outpatient Clinical Addition and Emergency Generator
47	1978	NC	Emergency Generator Building
T-105 through T-109	1947	C	Quonset Huts
T-MD-4	2009	NC	Engineering Building
A	Circa 1993	NC	Picnic Pavilion
B	1995	NC	Engineering Offices and Storage Building
C	1940	C	Main Entrance Drive
D	2011	NC	Emergency Generator
E	1997	NC	Electric Switch Station

¹⁷ Gjore J. Mollenhoff and Karen R. Tupek, Veterans Administration Medical Center (Marion, Illinois) National Register of Historic Places Determination of Eligibility, Veterans Administration, Washington, D.C., 1980, located in the files of the United States Department of Veterans Affairs, Historic Preservation Office, Office of Construction and Facilities Management, Washington, D.C.; United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

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Resource 1 and 38. Main Building and Dental/Medical Building Addition. 1940 and 1988. Contributing building.

The main building (Resource 1, 1940) is a four-story, twenty-one bay, stucco exterior, flat-roof building resting on a raised concrete basement. Exhibiting Egyptian Revival decorative elements, the main building is located at the southern terminus of Commander Drive (Resource C, 1940) south of the flag pole (Resource 21, 1940) in the southern portion of the historic district. The main building (Resource 1, 1940) is oriented to the north.

The facade consists of a five-story central entry pavilion with a metal-clad pyramid capping the pavilion; three-story, flat-roof return wings on raised basements at either end of the facade; and single-light-over-single-light-hopper replacement windows with architectural terra cotta spandrels between the windows of each floor of the building's facade. The central entry pavilion consists of three bays with vertical strips of windows featuring architectural terra cotta spandrels. The replacement windows of the first three stories of the central facade pavilion are composed of single-light fixed-over-hopper-sashes set in pairs. Polychrome engaged terra cotta columns with lotus capitals extend three stories in height, and a cavetto cornice that extends nearly the width of the central pavilion is located above the engaged columns and exhibits bundled shafts. An eagle sculpture of architectural terra cotta is located on either end of the cornice head. The windows of the upper two stories are fixed single-light sashes set between terra cotta pilasters with polychrome lotus capitals. A polychrome terra cotta cavetto cornice encompasses the perimeter of the central projecting pavilion with a parapet that exhibits polychrome sun disk ornamentation. The polychrome terra cotta elements were repainted in 2011.¹⁸ The cornice is set beneath the metal clad pyramid that caps the pavilion. A vent with a grill and temple pylon surround is located within the parapet. According to the original plans both the grill and pylon surround are composed of terra cotta.¹⁹ The double-leaf entrance to the central pavilion is placed within the center bay of the first floor and includes replacement aluminum frame glass doors that features a single-light aluminum transom set beneath a polychrome, semi-circular, flat-roof, cantilevered porch. Steps lead to the entrance, and a bronze plaque with pyramid and sphinx bas relief is located to the east of the facade entry.

A seismic stabilization project was undertaken for the main building in the late 1980s. This project included the erection of seismic stabilization towers along the rear elevation of the building, stairway/stabilization towers along the interior elevations of the facade return wings, and the strengthening of other exterior walls. Portions of the building's original exterior walls were strengthened by adding a layer of structural concrete over the walls. This included approximately 7–8 inches of new structural concrete to the walls. Additional seismic stabilization took place along the exterior walls of the main block's facade to either side of the central projecting pavilion, portions of the courtyard facing walls of the facade return wings, portions of the rear elevation, and a portion of the exterior side (east and west) elevations of the main building (Resource 1). Along with the added structural concrete, the project clad the concrete in stucco and utilized terra cotta spandrels below the window openings that closely mimicked the designs of the original spandrels, which were covered in the seismic stabilization project. If the original terra cotta spandrels were undamaged, they were reused along the exterior of the building. The most notable change in the exterior of the main building caused by the seismic stabilization project, other than the construction of the towers, is the increased depth of the window reveals. The modification to the window reveals moderately diminishes the characteristics of design and materials of the main building, as the replacement materials and executed design of the seismic project are consistent with the original construction of the building.

¹⁸ United States Department of Veterans Affairs, information provided by the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

¹⁹ United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

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The three-story facade return wings consist of three bays of windows. The central bay is composed of a ribbon of three narrow windows filled with replacement sashes identical to those of the first three stories of the central entry pavilion. The center second- and third-floor facade windows of the return wings have been enclosed. The outer two bays of the return wings' facades are composed of larger windows filled with similar replacement single-light fixed-over-hopper-sashes. Similar replacement windows are found throughout the building. The windows would have originally been filled with six-over-six or eight-over-eight-light double-hung sashes. The windows are set between terra cotta pilasters with polychrome cavetto capitals that extend to the top of the third-floor windows of the return wings. These pilasters are identical to those located on the central entry pavilion, but the capitals are simpler in design. A polychrome cavetto cornice encompasses each return wing, and a terra cotta parapet with sun disk ornamentation is located above the cornice. Modern mechanical equipment related to the air conditioning system is visible on the roof of each facade return wing. A full height, narrow tower addition clad in stucco containing a single-leaf entry with a metal door is located on each of the inside elevations of the return wings. These additions, which exhibit no windows but mimic the pilasters of the facade on their exteriors with the exception of their monochrome color, contain stairways and also serve as seismic stabilization towers. The tower additions partially obscure the original view of the main building (Resource 1, 1940). The windows of the raised basement are filled with sashes similar to those on the remainder of the facade.

The side (east and west) elevations consist of vertical strips of windows set singly and in pairs. The two northernmost strips are framed by polychrome terra cotta pilasters with cavetto capitals. A short, one-story, enclosed connecting corridor connects the main building (Resource 1, 1940) to the education building (currently the prosthetics and information resource management building, Resource 37, 1979), located to the west of the main building (Resource 1, 1940).

Much of the rear elevation is no longer visible because of the dental/medical building addition (Resource 38, 1988) and seismic tower additions, all constructed after the period of significance. However, an entry to the connecting corridor that extends to the west to the education building addition (Resource 37, 1979) is located on the southwest corner of the rear elevation and consists of a glass and aluminum door set beneath a flat metal roof supported by metal posts. A concrete ramp leads to the entry. A tower addition for seismic stabilization, similar to the stair tower additions along the interior of the facade return wings, is located to the east of the entry. A similar seismic stabilization tower is located to the east of the education building addition (Resource 37) along the southeast portion of the main building's rear elevation.

The interior lobby of the main building remains largely intact. It consists of polychrome pilasters and engaged columns with bundled shafts and lotus capitals as well as polychrome molding with a lotus motif. While the floor tile is not original, it features a pyramid and sphinx. The lobby is a contributing element to the building.

The dental/medical building addition (Resource 38) was constructed in 1988 along the rear elevation of the main building (Resource 1) and extends to the north elevation of the dining hall building (Resource 2, 1940). This addition replaced the original three-story, flat-roof, narrow corridor that connected the main and dining hall buildings (Resource 1 and 2, 1940). The dental/medical building (Resource 38, 1988) is a three-story, flat-roof building with a stucco exterior. A fourth floor, containing mechanical equipment and recessed from the wall planes of the addition, extends along the width of the building.²⁰ A large flat-roof projection is set atop the fourth-floor roof with an attached communication tower that extends upward. An entry is located in the center of the west elevation's first story. This entry consists of automatic aluminum and glass doors set beneath a flat, metal roof that extends the width of the building's west elevation. The east elevation of the dental/medical building addition is located along a patio surrounded by the main building, the dental/medical building addition, and the

²⁰ United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

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outpatient clinical addition (Resources 1, 1940; 38, 1988; and 42, 1998). One-over-one-light, double-hung, metal windows are located on the first three stories. They are slightly recessed, mimicking the vertical strips of windows of the main and dining hall buildings.

Resource 2. Dining Hall Building. 1940. *Contributing building.*

The three-story dining hall building (Resource 2, 1940) was originally a separate building located south of the main building (Resource 1, 1940). The two buildings were originally connected by a narrow, three-story, flat-roof corridor. The original connecting corridor was replaced by the dental/medical building addition (Resource 38) in 1988. The dental/medical building addition currently connects the main and dining hall buildings (Resources 1 and 2, both 1940). The facade of the dining hall building is oriented to the north, facing the rear of the main building. The majority of the dining hall building's facade elevation is currently obscured by the dental/medical building addition and a single-story corridor from the outpatient clinical addition (Resource 42, 1998). The dining hall building has a flat roof of varying heights and is clad in stucco.

The side (east and west) elevations consist of vertical strips of windows identical to those on the rear (south) elevation of the building. The fenestration of the side elevations consist of vertical strips of one-over-one, double-hung, replacement vinyl windows with architectural terra cotta spandrels. The third floor windows along the west (side) elevation, near the rear elevation, have been enclosed although the locations of the former openings are apparent. Two sets of windows along the side elevations flank a three-story, flat-roof addition for seismic stabilization that is nearly identical to those located on the rear elevation of the main building (Resource 1, 1940). The seismic stabilization additions, one on each side elevation, are narrow towers that exhibit no windows and have stucco exteriors, and for which the only detailing is found on the paired vertical panels that extend from the first floor to the cornice line above the third-floor level. The seismic stabilization tower additions were constructed in the late 1980s. A three-story stairwell addition is located on the east elevation of the dining hall building (Resource 2) near the facade elevation and the single-story corridor from the outpatient clinical addition (Resource 42, 1998). A stairwell appears in this location in early construction plans for the dining hall building, although it is unclear if this is the same stairwell dating to the period of significance.

The rear (south) elevation of the dining hall building (Resource 2) has eighteen-bays along the second floor. Two single-leaf entries are found in the western corner of the south (rear) elevation of the building. Both entries open onto a concrete porch sheltered by a metal flat roof supported by a decorative post. One of the entries is filled with a single-light wood door while the second has a nine-light door covered with an aluminum storm door. The west portion of the rear elevation's first floor has a loading dock sheltered by a flat, metal roof supported by metal posts. Two large bays open onto the loading, one filled with a metal overhead door and a second with two horizontal sliding doors. A flat-roof, single-story addition extends outward from the eastern half of the rear elevation and consists of a row of full height, fixed, glass and aluminum windows. An entry is located in the eastern corner and consists of a glass and aluminum door. This addition, constructed after the period of significance, currently contains the dining room. The majority of windows along the rear elevation are paired vertical strips of one-over-one, double-hung, replacement vinyl windows with architectural terra cotta spandrels beneath the window openings. A polychrome cavetto cornice, similar to that found on the main building (Resource 1), extends along the rear and east elevations of the dining hall building. A large mechanical equipment addition is visible on the eastern portion of the roof.

Resource 8. Nurses' Quarters. 1940. *Contributing building.*

The nurses' quarters (Resource 8, 1940) is a rectangular, two-story, five-bay, flat-roof building on a raised basement. Oriented to the north and facing away from the main building, the nurses' quarters building is located approximately 560 feet northeast of the flag pole (Resource 21, 1940) that is situated in front of the main building (Resource 1). The nurses' quarters (Resource 8) originally served as residential quarters for a portion of the

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nursing staff and currently contains the medical center's mental health services. The central three bays of the facade project slightly from the wall plane of the building. The facade projection has a polychrome cavetto cornice, centered over the cornice is a terra cotta lotus flower decoration flanked by terra cotta sun disks. A single-story, flat-roof porch shelters the three central bays of the facade. This porch has three bays along its facade that are created by the large corner supports and square columns. The porch has a terra cotta cavitto cornice with vertical leaves, and the metal railings are nearly identical to the railings depicted in the original construction drawings.²¹ The centered, single-leaf entry sheltered by the porch has a replacement metal door. Flanking the central entry are windows filled with replacement single-over-single-light, double-hung sashes. The windows of the facade, left side (east elevation), and rear elevations are located within slight vertical recesses that extend from the water table to the top of the second-floor windows. The windows throughout the nurses' quarters are filled with replacement single-over-single-light, double-hung sashes. The water table encompasses the building. The basement windows, visible along the facade and rear elevations, are filled with replacement single-light sashes. To the right (west) of the facade porch, an at-grade entrance and elevator tower have been added to the facade after the period of significance. The addition encloses the two first-floor windows and one of the second-floor windows to the right of the facade porch. The entrance addition has a single-story projection, extending beyond the porch, with two horizontal sliding automatic aluminum frame and glass doors. A roof projection slightly shelters the new entry. The elevator tower to the rear of the new entry extends beyond the original cornice of the building.

Originally, three windows were located along the first and second floors of the side elevations of the nurses' quarters. The four outer windows of the right side (west elevation) have been enclosed with stucco and their outlines are no longer visible. The center two windows have been modified to accommodate two single-leaf entries filled with metal, single-light doors. Both entries on the west elevation open onto a metal, exterior stairway. To the right (south) of the entries is a metal ladder that has been attached to the building for roof access. The left side (east elevation) of the nurses' quarters retains its six window openings, although the sashes have been replaced.

The rear elevation of the building is seven-bays wide with a central, single-leaf entry. Concrete steps flanked by metal railings lead to the central facade entry. The railings appear to be the same as those depicted in the original construction drawings.²² The centered, single-leaf entry is filled with a replacement metal door. The elaborate door surround is composed of terra cotta and exhibits a polychrome winged sun disk immediately over the entry and a polychrome cavetto cornice with vertical leaves. Flanking the central facade door surround are light fixtures that are nearly identical to those depicted on the original construction drawings.²³ To the left of the central facade entry, directly below the second window from the west elevation of the building, are steps leading down to a single-leaf, below grade, basement entry.

A terra cotta, monochrome, cavitto cornice encompasses the building. Centered along the rear elevation, above the cornice, is a line of terra cotta sun disks similar to those found along the facade. The building is clad in stucco and has a concrete basement foundation.

The alterations to the nurses' quarters have diminished the characteristics of design, materials, and workmanship of the building, especially the addition of the new entry and elevator tower along the facade. The new entry and elevator tower obscure a portion of the facade, resulting in the enclosure of three facade windows and the alteration of the facade's original fenestration pattern. The exterior cladding of the addition is sympathetic to the original exterior materials, and the addition's design clearly dates it to the last decades of the twentieth

²¹ United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

²² Ibid.

²³ Ibid.

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century. While the addition, replacement windows, and enclosed windows diminish the integrity of the building, the resource continues to retain the majority of its original massing, footprint, and decorative details. Therefore, even though its integrity has been diminished, the nurses' quarters is a contributing resource to the Marion VA Hospital Historic District.

Resource 13. Attendants' Quarters. 1940. *Contributing building.*

Currently utilized as the engineering office, the attendants' quarters is located southeast of the outpatient clinical addition (Resource 42, 1998). The building is a two-story, five-bay, flat-roof building with a stucco exterior. One-story, flat-roof porches that have been enclosed project from each side elevation. The attendants' quarters (Resource 13, 1940) is set on a raised concrete basement and oriented to the north.

The facade consists of slightly recessed windows filled with vinyl, one-over-one-light, double-hung replacement sashes and a central entrance pavilion. The entrance pavilion projects slightly from and above the remainder of the facade wall plane. It consists of a single-light wood door similar to the original and a transom set into a polychrome, terra cotta, battered door surround with a cavetto cornice decorated with vertical leaves. Poured concrete steps lead to the entry, and the porch has a metal railing. Flanking the door surround are light fixtures similar to those found on the rear elevation of the nurses' quarters (Resource 8, 1940). The polychrome cavetto cornice line of the entry pavilion is set below a terra cotta decoration that exhibits a lotus flower and sun disk ornamentation. The remainder of the building exhibits a monochrome terra cotta cavetto cornice line.

The facade elevations of the enclosed side porches exhibit windows with a fixed, single-light vinyl sash flanked by single-over-single, double-hung sashes. The side (west and east) elevations of the former porches exhibit three recessed bays with fixed awning windows located in the two northernmost bays. The southernmost bay on each of the former side porches exhibits a pair of windows similar to those located on the facade. The fixed awning windows on the left side (east elevation) have been enclosed. The former rear open bay of the right side (west) porch has been enclosed with stucco. A single-leaf entry filled with a metal door is located on the rear elevation of the former left side (east) porch. This entry is set beneath a metal awning roof supported by a metal post. A wood ramp leads to the entry. The windows of the two southernmost bays on the second story of the right side (west elevation) have been enclosed with a metal door and stucco. A fixed metal ladder leads to the roof and a metal fire escape leads to the rear of the building. The windows on the second story of the left side (east elevation) are identical to those on the facade, although air conditioning units have been placed in the upper sashes of two of the windows.

The rear elevation of the attendants' quarters (Resource 13) consists of six windows on each story similar to those of the facade. A single-leaf basement entry filled with a metal door is located on the rear elevation. Concrete steps lead to the partially below grade entry. The majority of the basement windows have been filled with vents.

Resource 14. Boiler House. 1940. *Contributing building.*

Resource 14 is the boiler house (1940), oriented to the south and located in the maintenance/utility group of buildings to the east-southeast of the outpatient clinical addition (Resource 42, 1998). Resource 14 continues to serve as the boiler plant for the facility. The building is composed of a five-bay, flat-roof, single-story facade section, and the rear flat-roof portion containing the boilers steps up in height but continues to contain a single-story interior. The exterior of the building is clad in stucco. The five facade bays were originally filled with garage bays. Three of the bays continued to be filled with overhead doors, but the center bay has been altered to accommodate a double-leaf pedestrian entry filled with metal doors. The bay to the left of the central pedestrian bay is partially enclosed to accommodate a large vent. The right side (east elevation) of the building has five bays delineated by slight projections, similar to pilasters, between each bay and at the ends of the elevation. The windows are filled with multi-light, stacked, industrial windows with the middle six lights filled with awning sashes. The windows along the rear portion of the building, which has a larger massing than the front sections, are

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paired on the east and rear elevations. The rear of the building is partially below grade. Four bays filled with paired, stacked industrial windows originally extended along the rear elevation. Currently two of the windows retain the original sash configuration (the eastern bay and the second bay from the western elevation). The easternmost rear bay has a partially below grade, two-leaf pedestrian entry added below the windows. This entry is filled with twelve-light metal doors. The next window bay to the west along the rear elevation has been altered, with the lower window having been enclosed and a garage entry added below the remaining window opening. This garage entry, filled with a metal overhead door, is partially below grade. The window opening near the western edge along the rear elevation retains its upper sashes, but the lower window opening has been partially enclosed and filled with replacement single-over-single-light, double-hung sashes. At the northwest corner of the rear elevation is a flat-roof projection that is partially below grade. This section, which appears on the original construction drawing, has steps that extend below grade to a single-leaf pedestrian entry with a window filled with a metal sash to the right of the entry. A below grade window is also located on the west side of this rear projection. The west elevation of the boiler house has three bays: two with industrial awning windows similar to other windows throughout the building and a bay filled with paired windows over a single-leaf entry with a replacement door and six-light window to the right of the entry.

Resource 15. Garage Building. 1940. Contributing building.

Resource 15, the garage building, was constructed in 1940 to serve as the garage for the facility. Currently the building contains maintenance and operations services. The garage building, oriented to the north, is located near the southeast corner of the historic district in the maintenance/utility group of buildings. Resource 15 is a single-story, eight-bay (d/w/w/w/d/d/d), flat-roof building clad in stucco with a rectangular footprint. The facade of the building originally had nine garage bays filled with overhead doors.²⁴ Only two of the garage bays remain intact, filled with replacement, metal overhead doors. The westernmost former bay has been enclosed with stucco. The remaining seven bays have been partially enclosed to accommodate windows or single-leaf pedestrian entries. Three of the original bays have been partially filled with stucco and contain single-leaf entries filled with metal doors and sheltered by metal awnings. Another three original bays contain long, narrow window openings filled with single-light fixed sashes, and the top portion of the window opening is filled with an air conditioner unit. The side (east and west) elevations originally exhibited three bays: a window filled with an awning sash, a larger window opening in the center of the elevation with a ribbon of three awning sashes, and a single-leaf pedestrian entry.²⁵ The west elevation retains the single window opening, which is filled with single-over-single-light replacement sashes, and the single-leaf pedestrian entry. The entry is filled with a replacement metal door and sheltered by a metal awning. The center, larger window has been enclosed with stucco. A metal ladder has been attached to the west elevation of the building for roof access. The three bays of the left side (east elevation) have been filled with stucco, although window air conditioning units are located in two of the former window openings. The rear elevation of the building originally had thirteen bays, including a single-leaf entry and window bays filled with either a single window or ribbons of three windows.²⁶ Nearly all of the former bays along the rear elevation have been enclosed with stucco. Two windows remain filled with single-over-single-light replacement sashes, and a single-leaf entry filled with a replacement door is also located along the rear elevation. The garage building (Resource 15, 1940) originally exhibited little in the way of decorative elements. The building retains a wide stringcourse above the window/garage bay openings and a pair of stringcourses between the prior stringcourse and the metal cap of the roof's parapet wall. The building has a concrete foundation.

²⁴ United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

²⁵ Ibid.

²⁶ Ibid.

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Resource 16. Storehouse Building, 1940. Noncontributing building.

Resource 16, constructed in 1940, originally served as the storehouse building for the facility. Currently the building serves as the medical center's warehouse. The storehouse building is located in the southeast portion of the historic district in the maintenance/utility group of buildings and to the west of the garage building (Resource 15, 1940). Oriented to the north, the storehouse building is a single-story, five-bay (d/w/d/d/d), flat-roof building clad in stucco with a nearly rectangular footprint and very minimal decorative elements. The original block of the building is supported by a concrete foundation. Resource 16 originally had a symmetrical facade with nine bays and a loading dock that extended nearly the entire length of the front of the building.²⁷ The facade wall plane was nearly flat except for the ends, which had sections with slight projections. The outer two bays of the facade within the slight projections retain their single-leaf pedestrian entries but are filled with replacement metal doors. The other three bays of the facade have been altered since the end of the period of significance. The alterations include a window that has been partially enclosed and exhibits a single-light replacement sash; a double leaf entry modified as a single-leaf pedestrian entry filled with a replacement metal door; and a large opening originally filled by double doors and a transom that currently contains a replacement, metal overhead door. The loading dock extends the length of the facade and is sheltered by a nearly flat, metal roof supported by metal posts. A portion of the loading dock, near the western end, has been enclosed with a stucco exterior. An addition to the facade, east of the enclosed portion of the loading dock, extends to the north beyond the original loading dock. This addition, also with a flat roof and clad in stucco, has a single loading dock entry along both side (east and west) elevations that allow delivery trucks to park parallel to the facade of the storehouse building. The addition's entries are filled with metal overhead doors. Originally the side (east and west) elevations of the building had five window bays. Currently, the left side (east elevation) has a single window filled with replacement single-over-single-light double-hung sashes. All of the former window openings on the right side (west elevation) have been enclosed. Located to the immediate west of the storehouse building is a shed-roof structure with a metal panel exterior on a concrete block foundation, although the south portion of the foundation is composed of poured concrete. The east elevation of the structure, a refrigerator/freezer, is separated by only a few feet from the west elevation of Resource 16, although the loading dock has been extended along the north elevation of the shed-roof refrigerator/freezer.

A single-story, flat-roof addition has been constructed along the entire rear elevation of the original building. This addition is clad in stucco and is the same height as the original block of Resource 16. The addition has no bays along its west and rear (south) elevations. A pedestrian entry with a metal, single-light door is located along the east elevation of the addition. Both the rear addition and the refrigerator/freezer were constructed by the late 1980s.

The storehouse building (Resource 16, 1940) has been altered substantially since the end of the period of significance. Modifications to Resource 16 include the alterations to the original fenestration of the facade, such as enclosing bays, replacement door and windows; the enclosing of windows along the side elevations of the original block of the building; enclosing a portion of the loading dock; the addition to the facade of the building; the addition of the refrigerator/freezer to the west of the storehouse building; and the addition to the rear of the building that enlarges the original footprint and totally obscures the rear elevation of the original block of the building. These alterations have diminished the integrity of materials, design, and workmanship to a degree that it no longer retains integrity to convey its significance. Therefore, the storehouse building (Resource 16, 1940) is not a contributing resource to the Marion VA Hospital Historic District.

²⁷ United States Department of Veterans Affairs, located in the files of the Public Affairs Office, Marion Veterans Affairs Medical Center, Marion, Illinois.

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Resource 21. Flag Pole. 1940. Contributing object.

The flag pole (Resource 21, 1940) is located north of the main building (Resource 1, 1940) at the terminus of Commander Drive in the center of a circular parking area. It consists of a concrete base that supports a metal flag pole with a ball finial. The base is surrounded by a circular concrete sidewalk. A bronze plaque with a pyramid and sphinx bas-relief is located on the north side of the concrete base. The plaque indicates the trees aligned along Commander Drive "ARE DEDICATED TO THE MEMORY OF THE PAST DEPARTMENT DIVISION AND DISTRICT LEGION COMMANDERS OF EGYPT." Located below this inscription are the names of numerous past legion commanders representing four districts.

Resource 23. Incinerator Building. 1952. Noncontributing building.

Resource 23 was constructed in 1952 to serve as the incinerator building, and currently it appears to be utilized for storage. This is a one-story, single-bay, flat-roof, concrete block building with a concrete foundation. The incinerator building, oriented to the south, is located in the southeast portion of the historic district in the maintenance/utility group of buildings. Situated to the east of the boiler house (Resource 14, 1940), the incinerator building originally had a raised basement and a brick, square chimney to the rear of the building.²⁸ No evidence of the basement remains visible on the exterior of the building and the chimney has been removed. The facade of the building has a large delivery opening filled with an overhead door. The entry is slightly off center to the left (west). A flat-roof awning extending from near the top of the building partially shelters the facade entry. The right side (east elevation) of the building has a pedestrian entry filled with a replacement metal door. Concrete steps with a metal railing lead to the entry. To the right of the entry is a window filled with a replacement single-light fixed sash. A window with a similar sash is located on the rear elevation.

Resource 37. Education Building. 1979. Noncontributing building.

The education building (Resource 37), constructed in 1979, is located to the west of the main building (Resource 1, 1940) in the south-southwest portion of the historic district. Resource 37 currently contains prosthetics and information resource management services. Oriented to the north, the education building is a single-story, eleven-bay, flat-roof building clad in stucco. The only exterior ornamentation exhibited by the education building is a plain cavetto cornice. The asymmetrical facade fenestration includes a double-leaf entry filled with metal frame and glass doors. The entry, located along the western portion of the facade, is sheltered by a flat-roof, cantilevered awning. Windows along the facade have concrete sills and are filled with sashes composed of a fixed light over an awning sash. A single-story section, higher in massing than the main block of the building and set back from the facade's wall plane, is located along the west elevation of the main block. This section of the building has a single-leaf entry along the facade near the main block of the education building. The entry, filled with a metal door, is sheltered by a flat roof awning. No window bays are located along the remainder of the facade or west elevation of this section of Resource 37.

The one-story, flat-roof, narrow corridor connecting Resource 37 to the main building (Resource 1, 1940) is located on the left side (east elevation) of the education building. The north elevation of the corridor has a single-leaf entry with a metal, single-light door. Flanking the entry are windows similar to those found along the facade of the education building. Similar windows are also found along the south elevation of the corridor. Four windows are also found along the east elevation of the education building, north of the connecting corridor.

A rectangular addition has been constructed along the rear elevation of the education building, extending the majority of the rear elevation's length. This addition was constructed after 1988.

²⁸ United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

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Resource 42 and 50. Outpatient Clinical Addition and Emergency Generator. 1998. Noncontributing building.

The outpatient clinical addition (Resource 42, 1998) is connected to the east elevations of the main building and dining hall building (Resources 1 and 2, 1940) via short, single-story connecting corridors. The outpatient clinical addition (Resource 42), constructed in 1998, is a single-story building with a large footprint. Oriented to the north, the outpatient clinical addition (Resource 42, 1998) is clad in stucco and has a flat roof. The asymmetrical facade has a projecting main entry composed of large, single-light, aluminum frame windows. The facade entry consists of a metal and glass revolving door set between horizontal-sliding automatic doors. A canopy with a pyramidal roof covers the entry and a portion of the circular drive in front of the building. The canopy extends to the west as it is connected to a circular concrete enclosure with the "VA" emblem attached. This section of the canopy also shelters a portion of the circular drive. Windows flanking the projecting main entry consist of large six-light fixed metal sashes or three-light fixed sashes. A single-story corridor, recessed from the facade wall plane, connects the outpatient clinical addition to the basement level of the main building's (Resource 1) east elevation. This corridor has a double-leaf entry filled with metal frame glass doors along its facade elevation. Large vents fill openings along the northeast corner of the facade and east elevations of the outpatient clinical addition.

A single-story, flat-roof, rectangular extension is located along the east elevation of the building. This extension contains the ambulance entry with a large garage opening along both the facade and rear elevations. The garage openings are filled with metal overhead doors. To the immediate west of the facade garage entry is a double-leaf entry filled with metal frame glass doors. Four single-leaf entries, filled with metal doors, are found to the east (left side) of the facade's ambulance entry. To the rear (south) of the ambulance entry extension along the east elevation of the building are two double-leaf entries; one is filled with metal doors and a second with metal frame glass doors. Four windows on the east (left side) elevation have single-light, fixed sashes.

The rear (south) elevation has a number of windows similar to those on the east elevation of the building. The emergency generator (Resource 50, 1998) is a projection on the southeast corner of the rear elevation of the outpatient clinical addition (Resource 42). It is a small, one-story, rectangular structure clad in stucco paneling with a flat roof. A double-leaf entry is located on the south elevation and consists of a set of metal doors with a vented transom. A large vent is located east of the doors. The entry is set beneath a flat porch roof. A metal exhaust pipe extends from the porch roof. Another entry with a metal door and vented transom is located in the center of the east (side) elevation. The west portion of the rear elevation extends to the south, creating a second wall plane. This portion of the rear elevation has two large vents and two entries both filled with metal doors. Near the southwest corner is a projecting flat-roof porch sheltering two double-leaf entries filled with metal frame, single-light door and four large single-light windows. The southwest corner of the building is clad in rusticated concrete block. A single-story corridor, exhibiting horizontal-sliding automatic doors, connects the west elevation of the outpatient clinical addition (Resource 42) to the northeast corner of the dining hall building (Resource 2, 1940) and the east elevation of the dental/medical building addition (Resource 38, 1988). Between the north corridor (connecting the outpatient clinical addition to the main building) and south corridor (connecting the outpatient clinical addition to the dining hall building and the dental/medical building addition) is a patio. This patio fills the area encompassed by the outpatient clinical addition (Resource 42), the main building (Resource 1), and the dental/medical building addition (Resource 38).

Resource 47. Emergency Generator Building. 1978. Noncontributing building.

The emergency generator building (Resource 77), constructed in 1978, is located to the south of the education building (Resource 37, 1979) in the south-southwestern portion of the historic district. This is a small, flat-roof building clad in stucco panels. A single-leaf pedestrian entry filled with a metal door is located on both the east and west elevations. The north and south elevations have large vents.

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Resource T-105 through T-109. Quonset Huts. 1947. *Contributing building.*

This resource is composed of five interconnected Quonset huts (Resource T-105, T-106, T-107, T-108, and T-109) dating to 1947 that are currently utilized for various purposes by the engineering/facilities management department. The original function of the Quonset huts within the historic district is unknown, although surplus Quonset huts were placed at other Second Generation Veterans Hospitals after World War II to assist in the over crowding of hospitals because of the influx of World War II veterans. The Quonset huts were utilized at various hospitals as temporary storage buildings, residences, chapels, recreation buildings, and canteens. A building and location map of the Marion VA Hospital, revised to 1964, depicts the five existing Quonset huts various maintenance purposes, including paint shop; equipment storage; carpenter shop storage; electric/plumbing shop storage; and storage for the gardener's equipment.²⁹ Currently the Quonset huts are utilized for storage for the environmental management service, mechanical storage, the carpenter shop, lawn mowers, and for the metal shop.

Resource T-105 is located at the west end of the group of Quonset huts and Resource T-109 is situated at the east end. The upper portions of the curved roof Quonset huts are clad in corrugated metal and are supported by concrete knee walls. The Quonset huts are connected by flat-roof sections. The exposed roofs of the Quonset huts appear to have been coated with a type of sealant, but the corrugated nature of the metal is still visible. Oriented to the north, the facades of the Quonset huts and the flat-roof connectors form a vertical wall plane. Three of the Quonset huts have pedestrian entries along the facade elevations that are filled with replacement metal doors and two exhibit garage bays with overhead metal garage doors. Many of the windows that originally flanked the entries have been enclosed, but a few of the original window openings remain filled with four-light wood sashes. The facade and rear elevations of this resource are clad in corrugated metal panels. As with the facade, most of the windows flanking the rear entries have been enclosed or replaced, although examples of the original four-light sashes remain. Along the rear elevation, the entries to the Quonset huts have replacement doors and the flat-roof sections have double-leaf entries with metal doors. T-109, the Quonset hut at the east end of the resource, is longer than the other four Quonset huts and extends beyond the rear wall plane created by the four western Quonset huts.

Resource T-MD-4. Engineering Building. 2009. *Noncontributing building.*

The engineering building (Resource T-MD-4) was constructed in 2009. This building is located to the southeast of the attendants' quarters (Resource 13, 1940) in the south-southeastern portion of the historic district. Oriented to the north, this is a one-story, five-bay (w/d/w/w/w) modular building. The slightly pitched roof of the engineering building slopes to the east and west. The single-leaf pedestrian entry, filled with a metal door, is located in the second bay from the left (east) on the facade. Access to the facade entry is by a long ramp with railings. The windows along the facade are filled with single-over-single-light metal sashes. Similar windows are located along the east and rear (south) elevations. Three windows are located along the left side (east elevation). The rear elevation has a pedestrian entry similar to that found along the facade. Access to the rear (south) entry is by metal steps. Three windows are also located along the rear elevation. No windows are located along the right side (west elevation), but three air conditioning units are visible along the exterior wall of this elevation. The engineering building (Resource T-MD-4, 2009) is supported by a concrete slab foundation. The supports of the building are obscured by a metal or vinyl skirt.

Resource A. Picnic Pavilion. Circa 1993. *Noncontributing structure.*

Resource A is a gable-roof picnic pavilion located to the northeast of the education building (Resource 37, 1979). The picnic pavilion, constructed circa 1993, is approximately 30 feet wide and 60 feet in length. The ridgeline

²⁹ United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

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of the roof extends to the north and south. The structure is supported by wood posts resting on a poured concrete slab. Laminated rafters support the wood ceiling and roof. The roof is sheathed in asphalt shingles.

A concrete slab is located to the immediate east of the picnic shelter. Embedded in the concrete is a plaque that states: "RAMP AND PATIO GIFT OF I. F. W. C. TO PATIENTS OF MARION V.A. HOSPITAL 1961-1963." The I.F.C.W. may stand for the Illinois Federation of Women's Clubs.

Resource B. Engineering Offices and Storage Building. 1995. Noncontributing building.

Resource B is a one-story, two-bay (d/d), side-gable, metal-clad building located to the immediate south of the garage building (Resource 15, 1940). Located near the southeast corner of the historic district, Resource B is situated in the maintenance/utility group of buildings. The engineering offices and storage building, oriented to the south, has a central garage bay opening filled with a metal overhead door. To the left of this entry is a pedestrian, single-leaf entry filled with a metal door. There are no other bays along the facade or sides (east and west elevations) of the building. Two pedestrian entries filled with metal doors are located along the rear (north) elevation of Resource B. Both of these entries open onto wood decks with wood steps. Piping extends from the rear of the engineering offices and storage building and enters the rear of the garage building (Resource 15, 1940).

Resource C. Main Entrance Drive. 1940. Contributing site.

Resource C is the portion of the main entrance drive that remains unmodified since the Marion VA Hospital was constructed. The main entrance drive, also named Commander Drive, extends southward from West Main Street and terminates in front of the main building (Resource 1, 1940). Originally the main drive extended south from West Main Street in a straight line. In circa 2009 the northern portion of the main entrance drive was altered, and it now curves to the northwest before turning back to the north and intersecting West Main Street directly across from the northbound Interstate 57 on/off ramp. The original configuration of the entrance drive remains visible in the alignment of trees, which flanked the drive's original path. The modified northern portion of the drive is not considered a part of Resource C.

Resource C, the contributing portion of the main entrance drive, begins approximately 675 feet south of West Main Street and extends approximately 1,090 feet to the south, ending in front of the main building (Resource 1). This linear paved drive intersects North Periphery Road and also encircles the flag pole (Resource 21, 1940) to the north of the main building. The main entrance drive is partially aligned with trees.

Resource D. Emergency Generator. 2011. Noncontributing structure.

Resource D is an emergency generator placed within the historic district in 2011. This emergency generator is located to the immediate west of the previously described emergency generator (Resource 47, 1978) and south of the education building (Resource 37, 1979). This emergency generator appears to be a prefabricated structure supported by a concrete slab foundation. The narrow structure is clad in metal panels, and the roof has a slight slope to the east and west, with a roof ridgeline extending to the north and south. Two pedestrian entries with metal doors are found along the east and west elevations. The north elevation is filled by a large vent.

Resource E. Electric Switch Station. 1997. Noncontributing structure.

The electric switch station (Resource E, 1997) is located in the southeast portion of the historic district, to the southeast of the garage building (Resource 15, 1940) and west of the engineering offices and storage building (Resource B, 1995). The electric switch station is a small, flat-roof structure with a metal panel exterior. Pedestrian entries are located on the east and west elevations. These entries are filled with metal doors. Numerous metal doors providing access to the equipment are located on the south elevation of the structure.

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Areas of Significance: Criterion A

Politics and Government

The Marion VA Hospital Historic District is eligible under Criterion A in the areas of Politics and Government because of the intensive and successful political campaign conducted by the local community for Marion to be selected as the site for a veterans general medical and surgical hospital. This campaign to attract the federal facility to Marion testifies to the importance of the federal hospital as a source of local employment during both its construction and continuing operation. This local campaign, which was also conducted among several other communities within the state, illustrates the central role that political considerations played in the selection of sites for the Second Generation Veterans Hospitals. Several veterans hospitals existed in the Chicago area, but for veterans in southern Illinois, travel to these facilities for medical treatment was difficult. As early as 1934 a department within the American Legion presented a resolution to the VA for the construction of a federal general medical veterans hospital in southern Illinois. Lobbying efforts by the American Legion members in southern Illinois continued over the following years, winning the support of the Illinois governor in 1937 for the placement of a federal facility to serve veterans of the southern counties of the state.³⁰ The successful lobbying effort led to the Federal Board of Hospitalization's decision to locate a veterans hospital in southern Illinois, dependant upon the president's approval and congressional appropriations.³¹ Once approved, at least eight communities in southern and central Illinois began lobbying efforts for the hospital to be located in their vicinity. Marion was not included in the initial group of communities to be considered because the town's population was just below the threshold required by the federal government to support such a facility.³² Undaunted by this requirement, Marion's business leaders and fraternal organizations created an organization in 1938 specifically to persuade the government to build the future hospital in Marion.³³ Four local leaders traveled to Washington, D.C., in the autumn of 1938 for a presentation to cite the advantages of placing the federal facility in Marion. Marion's congressional representative accompanied the group. Eleven other Illinois communities also made presentations during the hearing.³⁴ Site inspections were later made in sixteen communities, but still no decision was forthcoming from the Federal Board of Hospitalization as to the preferred location for the hospital.³⁵ A letter writing campaign to congressional representatives and senators in Illinois and surrounding states was initiated by the Marion newspaper in early 1939, and by April of that year the decision was made to place the federal hospital to the west of Marion's city limits.³⁶ A celebration was held in Marion in late April 1939, including a parade.³⁷

³⁰ "Veterans Request 500-Bed Southern Illinois Hospital," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 3; Robinson E. Adkins, *Medical Care of Veterans* (Washington, D.C.: U.S. Government Printing Office, 1967), 398; "First Major Disappointment," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 3.

³¹ "General Hines Endorses Plans," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 3.

³² "Marion Citizens Take Action," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 4.

³³ "Forms Marion Cooperative Club," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 3.

³⁴ "Marion Citizens Take Action," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 4.

³⁵ "Keller Pledges to Get Hospital for Marion," "VA Hospital 31st Anniversary Edition," *Marion Daily Republican*, October 11, 1973, 4.

³⁶ "Washington Flooded With Letters and Telegrams," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 5; "Inspected Three Times Before [sic] Decision Came," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 5.

³⁷ "Thousands Participate in Jubilee Celebration," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 6.

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Ground was broken for the hospital on June 25, 1939.³⁸ The general construction contract was awarded to a Minneapolis, Minnesota, firm.³⁹ A plaque on the façade of the main building was unveiled at the dedication of the hospital in July 1941, although construction was continuing on the facility. Frank T. Hines, administrator of the VA, the governor, the former governor, and the former congressman instrumental in the procurement of the hospital for Marion attended the hospital's dedication, along with a crowd estimated at several thousand.⁴⁰ The Works Progress Administration (WPA) worked to complete the landscaping of the hospital, employing approximately sixty veterans.⁴¹ Few large trees, possibly dating to the WPA project, remain within the historic district, except those aligned along the original main entrance drive (Resource C), near the western property line, and near the attendants' quarters (Resource 13). The hospital staff originally included approximately 175 employees.⁴² The hospital remained important to the southern portion of the state, surrounding states, and the local community throughout the period of significance, as the Marion VA Hospital expanded to care for additional patients and continued to serve as an economic engine to the local economy.

Health and Medicine

The Marion VA Hospital Historic District is eligible under Criterion A in the areas of Health and Medicine at the state level because of the role the Marion VA Hospital played in the mission of the federal government, through the VA, to provide quality health care to the nation's veterans, primarily those who served in both World Wars. Thousands of veterans from southern Illinois, southwestern Indiana, and northwestern Kentucky received subsidized general medical and surgical care during the period of significance that they may not have received if the federal government had not provided such treatment for them. When the hospital officially opened in the summer of 1942, it had a capacity of 160 beds; 54 emergency beds were later added to alleviate increased patient loads. Initially the hospital employed 8 doctors, 28 nurses, 26 attendants, and 113 employees filling other positions. The first patient was admitted on June 8, 1942. The 1,000th patient to be admitted to the facility since becoming operational in 1942 occurred on April 19, 1943.⁴³ New services offered to veterans also increased staff numbers. By 1946 medical rehabilitation and occupational therapy sections had been added to the facility. At the end of the 1946 fiscal year (June 30), the Marion VA Hospital continued to have a capacity of 214 beds consisting of 160 standard and 54 emergency beds. The general medical hospital's beds were designated according to the following medical service: general medical and surgical, 202 beds, and neuropsychiatric, 12 beds. In mid-1947 the Marion VA Hospital had a capacity of 202 beds, including 176 standard beds and 26 emergency beds. One

³⁸ "Annexation Involves 160 Families," *Marion Daily Republican*, October 11, 1973, 8.

³⁹ "New Bids \$160,000 Lower," *Marion Daily Republican*, October 11, 1973, 7; "More Cutbacks In Original Plans," *Marion Daily Republican*, October 11, 1973, 7.

⁴⁰ "Plaque, Placed At Entrance to Veterans Hospital Which Will Be Unveiled By General Frank T. Hines In Marion On Sunday Afternoon, July 20," *Marion Daily Republican*, July 11, 1941; "Dedication of Bronze Plaque," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 8; Wilma B. Roth, "VA Medical Center Serves Area; Visit The Hospitalized Veterans," unknown newspaper, November 8, 1978, 16.

⁴¹ "Delay in Construction and Landscaping Postpones Vets Hospital Dedication," *Marion Evening Post*, May 4, 1942; Robert A. Ryan, *Historic American Building Survey*, "Veterans Administration Medical Center, Old State Route 13 West, Marion, Williamson County, Illinois, HABS No. IL-1155" (Dennett, Muessig, Ryan and Associates, Ltd., 1989): 9, located on the World Wide Web on the Library of Congress website, "Historic American Buildings Survey," <http://lcweb2.loc.gov/pnp/habshaer/il/il0500/il0575/data/il0575data.pdf>, accessed February 2011.

⁴² *Marion Evening Post*, "Marion Hospital Opened in 1942," September 3, 1946.

⁴³ Stan J. Hale, *Williamson County, Illinois, Sesquicentennial History* (Paducah, Kentucky: Turner Publishing Company, 1993), 495; *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," "First Patient Admitted," October 11, 1973, 8; *Marion Evening Post*, "Marion Hospital Opened in 1942," September 3, 1946; Shannon Woodworth, "VA Medical Center is alive and well," *Marion Daily Republican*, December 23, 1992.

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hundred eighty-one patients were receiving treatment at the Marion VA Hospital on June 30, 1947, including 2 tuberculosis patients; 13 neuropsychiatric patients; and 166 general medical and surgical patients. By 1947 the hospital had treated 14,575 patients.⁴⁴ According to the 1948 annual report, the Marion VA Hospital's capacity remained constant at 202 beds. The hospital continued to be designated as a general medical and surgical hospital and on June 30, 1948, there were 145 patients at the facility. The majority of these were general medical and surgical patients (132), while one patient was being treated for tuberculosis and twelve for neuropsychiatric illnesses.⁴⁵ The capacity of the hospital was decreased to 176 beds by mid-1949 and on June 30th of that year the Marion VA Hospital was serving 133 admitted patients.⁴⁶ At the end of June 1950, the facility continued to be designated as a general medical and surgical hospital and 138 patients were being treated at the Marion VA Hospital.⁴⁷ The Marion VA Hospital Historic District continues to serve as a physical reminder of medical care provided by the federal government through the VA to veterans throughout the period of significance.

Area of Significance: Criterion C

Architecture

The Marion VA Hospital is eligible under Criterion C in the area of Architecture at the state level because it is an excellent, and the only, example of a Period II general medical and surgical Second Generation Veterans Hospital utilizing the Egyptian Revival architectural style. This architectural style was considered an exotic style, and although it was popular during the early decades of the twentieth century, it was also somewhat rare. The southernmost portion of southern Illinois lies in an area between the Ohio and Mississippi Rivers. Early settlers of this region grew wheat and other grains, and these farmers appear to have related this area to the fertile lands referred to in Biblical Egypt and situated in the Nile River delta. The southernmost portion of Illinois became identified as "Egypt" or "Little Egypt." The resulting parallels between southern Illinois and Egypt are visible in the region through the utilization of Egyptian community names such as Cairo, Thebes, Karnak, Dongola, Carmi, and Boaz. This association with ancient Egypt is not as prevalent as in the past, but the architecture of the Marion VA Hospital Historic District dating to the period of significance is a constant reminder of this former connection.⁴⁸

The VA used standardized architectural drawings to design their Second Generation Veterans Hospitals across the country. These standardized plans for each functional building type were based upon the number and type of hospital beds desired, the number of staff members that were to live on site, and the chosen architectural style for each campus. Occasionally these plans included stylistic variations based upon prevailing regional

⁴⁴ "Marion Hospital Opened in 1942," *Marion Evening Post*, September 3, 1946, 2; *Administrator of Veterans Affairs Annual Report for Fiscal Year Ending June 30, 1946* (Washington, D.C.: United States Government Printing Office, 1947): 96; *Administrator of Veterans Affairs Annual Report for Fiscal Year Ending June 30, 1947* (Washington, D.C.: United States Government Printing Office, 1948): 97; Shannon Woodworth, "VA Medical Center is alive and well," *Marion Daily Republican*, December 23, 1992.

⁴⁵ *Administrator of Veterans Affairs Annual Report for the Fiscal Year Ending June 30, 1948* (Washington, D.C.: United States Government Printing Office, 1949): 113.

⁴⁶ *Administrator of Veterans Affairs Annual Report for Fiscal Year Ending June 30, 1949* (Washington, D.C.: United States Government Printing Office, 1950): 120.

⁴⁷ *Administrator of Veterans Affairs Annual Report for Fiscal Year Ending June 30, 1950* (Washington, D.C.: United States Government Printing Office, 1951): 140.

⁴⁸ Robert A. Ryan, Historic American Building Survey, "Veterans Administration Medical Center, Old State Route 13 West, Marion, Williamson County, Illinois, HABS No. IL-1155," (Dennett, Muessig, Ryan and Associates, Ltd., 1989): 7, located in the files of the United States Veterans Affairs, Medical Media Department, Marion Veteran Affairs Medical Center, Marion, Illinois.

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architectural or cultural influences. The majority of Period II VA hospitals (built between the late 1920s through 1950) were designed in the Colonial Revival style with Classical Revival decorative elements. The Marion VA Hospital utilized a variation of the standardized designs normally associated with Second Generation Veterans Hospitals. Modifications made to the standardized designs to accommodate the Egyptian Revival architectural style influenced by the regional identity of the southernmost portion of Illinois includes modifications to the exterior of the buildings such as the use of flat roofs; the Egyptian-style, poly- or monochromatic architectural terra cotta utilized as exterior decorative elements such as the sun disks along the parapet walls, the door surrounds, cavetto cornice, and capitals of the pilasters; the pyramidal roof of the main building's central projection; and the exterior use of stucco. The verticality of the main and dining hall buildings are emphasized by the use of terra cotta spandrels aligned vertically with the window openings. While the majority of these exterior treatments are specific to the Marion VA Hospital Historic District, the massing and overall design of the buildings are very similar to the same functional types of buildings found at other Second Generation Veterans Hospitals, especially those dating from the late 1920s to 1950. The massing of the main building, with its façade return wings, is similar to Period II main buildings at other Second Generation Veterans Hospitals such as Lexington, Kentucky and Newington, Connecticut, except these two examples have side extensions containing porches, hip-roofs, and exhibit Colonial Revival and Classical Revival decorative elements. Like those found at the Marion VA Hospital's main building (Resource 1, 1940), the operating rooms are commonly located on the top or next to the top floors of the main buildings. The second and third floors commonly contained ward rooms, while the first floor was filled with administrative offices and clinical examination rooms, as was the case at the Marion VA Hospital. The rectangular massing of the two quarters buildings of the Marion VA Hospital Historic District is very similar to nurses' and attendants' quarters at other Period II Second Generation Veterans Hospitals, but the stucco exteriors, flat roofs, and Egyptian Revival exterior ornamentation differentiate the two Marion buildings from other examples. The side porches of the attendants' quarters are another common element for quarter's buildings, although the nurses' quarters (Resource 8, 1940) at the Marion VA Hospital was designed without side porches. The maintenance/utility buildings dating to the period of significance are similar in their original massing to those found at many other Period II facilities, except for the flat roofs of the garage and storehouse buildings (Resources 15 and 16, both 1940).

The Marion VA Hospital Historic District is an excellent example of the use of the Egyptian Revival architectural style for a federal veterans hospital and is the only example of a Second Generation Veterans Hospital constructed utilizing this architectural style. The Marion VA Hospital Historic District was designated a general medical and surgical hospital throughout the period of significance and continues to include characteristics of this sub-type, such as a location near town and major transportation routes; a monumental main building; no additional patient ward building other than the main building; residential quarters distanced from the central core group of administration/patient care building; and patient support buildings originally connected by an enclosed corridor. While the residential quarters are distanced from the administration/patient care building, the residential quarters at Marion are not grouped together like they are at many similar Period II hospitals. The original property was much larger than normal for a general medical and surgical veterans hospital and the dining hall/kitchen building does not incorporate the functions of the boiler house and station garage, but this can be attributed to the original plan to construct large domiciliary buildings within the campus to accommodate over 1,000 veterans; therefore, the physical plant was initially built for the expected future expansion.

Integrity

As a historic district eligible under both Criteria A and C, the Marion VA Hospital Historic District should retain a high degree of integrity of the resources' physical characteristics, including materials, workmanship, and design, and more ephemeral characteristics related to the historic district as a whole, such as location, setting, association, and feeling. Design refers to both the individual resources and the historic district as a whole.

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Although the resources within the historic district do not have to be individually exceptional, the resources and the historic district as a whole have to continue to reflect the spatial patterns and associations of the hospital campus dating to the period of significance. To retain integrity under Criterion A, the individual resources must retain those character-defining features that are necessary to convey their role in the mission of the federal government, through the VA, to provide general medical and surgical care to veterans throughout the southern portion of Illinois and surrounding states. These features are often found in the overall form, massing, and scale of the buildings and their relationship to one another within the historic district. To retain integrity under Criterion C, the individual resources must retain those character-defining features identified with the design of the specific building type and hospital sub-type as defined in the MPDF. This includes those features required under Criterion A, as well as noteworthy stylistic details and historical materials.

The Marion VA Hospital Historic District continues to serve as a medical facility and retains much of its original appearance dating to the period of significance during which the contributing resources were constructed. The Marion VA Hospital Historic District was designated a general medical and surgical hospital throughout the period of significance. Contributing resources retain most of their character-defining details. The hospital and its campus are situated at the original location. Resources that have been removed or demolished from within the historic district boundary include the radial chimney, or stack, associated with the boiler house (Resource 14, 1940); a temporary machine shed; four temporary barracks that were used as apartments for staff members; a possible gate house at the entrance to the facility along Commander Drive; a five-bay garage; and a residence predating the facility that was located near the entrance of Commander Drive.⁴⁹ Although the historic district has lost some elements dating from the period of significance, no major contributing buildings, such as administrative/patient treatment, staff quarters, and maintenance/utility buildings, have been demolished.

A major change to the landscape of the hospital occurred through the loss of over half of the original property. The original parcel contained 341 acres and this has been decreased over the years, as the medical center currently controls approximately 76 acres, according to the facilities management services of the Marion Veterans Affairs Medical Center.⁵⁰ The property was transferred to various entities after being determined surplus to the mission of the Marion VA Hospital, including the State of Illinois, an individual, the City of Marion, and the Community Unit School District No. 2. In 1984 the General Services Administration entered into an agreement with the Illinois State Historic Preservation Office and the Advisory Council on Historic Preservation to place protective covenants on a portion of the property that was later transferred from the ownership of the VA so that the vista of the Marion VA Hospital would be protected.⁵¹ These land sales reduced the VA's holdings to the polygonal-shaped property containing approximately 76 acres. The boundaries of the Marion VA Hospital Historic District are composed of approximately 47 acres of the total remaining 76-acre parcel.⁵²

⁴⁹ United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

⁵⁰ United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

⁵¹ *Veterans Administration Hospital Marion, Illinois: 31st Anniversary, 1942–1973*, 8, located in historical scrapbooks, Public Affairs Office, Marion Veterans Affairs Medical Center, Marion, Illinois; Untitled article, *Marion Daily Republican*, July, 1964; *Memorandum of Agreement*, March 22, 1984, located in files of Medical Media Department, Marion Veterans Affairs Medical Center, Marion, Illinois; United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois; *Williamson County, Illinois Land Atlas & Platbook* (Battle Lake, Minnesota: Accurate Publishing & Printing, Inc., 1991): 16.

⁵² United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

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A second landscape change occurred through modifications to the internal circulation network within the historic district, including the main entry drive (Resource C, 1940). The main entrance drive originally was a straight, linear drive extending to the south from West Main Street to the front of the main building (Resource 1, 1940) and encompassing the flag pole (Resource 21, 1940). Open lawns with trees flanked the main entrance drive, but the eastern portion of the original property, east of the entrance drive, was transferred from the VA's ownership and is no longer under the medical center's control. The State of Illinois currently owns the northern portion of the parcel to the east of the main entrance drive, and this parcel contains a State of Illinois regional office building. The modification concerns the recent realignment of the northern portion of the main entrance drive. This realignment created an intersection at West Main Street with the north bound on/off ramps for Interstate 57. The modification to the northern portion of the main entrance drive created a curving drive that extends to the south, then curves to the southeast before turning again to the south to connect to the original section of the main entrance drive (Resource C, 1940) approximately 670 feet south of West Main Street. This new section of the main entrance drive is located to the west of the original configuration of the drive. The new section of the drive, also incorporating a new lane extending to the northeast to serve as a second entrance to the State of Illinois regional office building, diminishes the characteristics of setting and design in relation to the Marion VA Hospital Historic District. Other alterations to the internal road system of the historic district include the introduction of the periphery roads. Originally, a connecting lane extended from the main entrance drive (Resource C) just east of the flag pole (Resource 21, 1940) and curved to the south to intersect the lane that extends to the east, past the attendants' quarters (Resource 13, 1940) and on to the maintenance/utility buildings. With the construction of the outpatient clinical addition (Resource 42, 1998), the majority of this original lane was removed from the landscape. This necessitated the construction of new drives within the medical center's property to connect the main and dining hall buildings (Resources 1 and 2) to the maintenance/utility group of buildings. The East Periphery Road already existed, but the North, South, and West Periphery Roads were added to the medical center's land, with the four periphery roads encircling the majority of buildings located in the southern portion of the property. A portion of the North and West Periphery Roads are located within the historic district boundary. The introduction and enlarging of existing parking lots within the historic district after 1950 also have altered the historic district's internal circulation system. The large parking lot to the west of the nurses' quarters (Resource 8, 1940) has been constructed since 1950, and the parking lot to the north of the outpatient clinical addition (Resource 42, 1998), located south of the North Periphery Road, has been greatly enlarged since 1950. The original portion of the main entrance drive (Resource C) that extends to the front of the main building (Resource 1) continues to contribute to the historic district, as only minor widening appears have occurred to it, and the original circular drive in front of the main building remains in place. The portions of the two periphery roads and additional parking lots diminish the characteristics of design and setting, but the paved parking lots continue to convey the open setting associated with the landscape of the historic district during the period of significance.

Changes to the historic district buildings include replacement doors, replacement windows, enclosed or partially enclosed windows for smaller openings, enclosed porches, and additions. Replacement windows are found on many of the buildings dating from the period of significance throughout the historic district. The main building (Resource 1) has single-light-over-single-light-hopper replacement windows, while the dining hall, nurses' quarters, and the attendants' quarters (Resources 2, 8, and 13) have single-over-single-light sashes. The majority of windows of the boiler house (Resource 14) appear to be original to the building, while the few remaining window openings of the garage building (Resource 15) are filled with replacement sashes. The replacement windows moderately diminish the integrity of design, materials, and workmanship of the buildings because the replacement sashes are unsympathetic to the original design of the resources and alter their appearance dating to the end of the period of significance. Replacement doors are found on all of the contributing buildings within the historic district. These replacements also moderately diminish integrity of design, materials,

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and workmanship of the resources because they do not reflect the doors originally installed. Enclosed windows are found on the majority of contributing resources within the historic district. Porches on the attendants' quarters (Resource 13, 1940) have been enclosed—presumably to create additional interior space—with windows and stucco walls. The former locations of the porches, and in many instances the former window openings, continue to be visibly recognizable although altered. Buildings dating to the period of significance also exhibit various additions. The attendants' quarters has a ramp for access to the rear of one of the former porches and metal exterior stairs at the west elevation for possible exit from the second floor during an emergency. A ground-level entry and elevator tower have been added to the façade of the nurses' quarters (Resource 8, 1940), along with metal exterior emergency stairs on the building's west elevation. The dining hall building (Resource 2) has a canteen/cafeteria addition along the east portion of its rear elevation and a large enclosure for mechanical equipment visible on the roof. The seismic stabilization improvements made to the main and dining hall buildings (Resources 1 and 2) are some of the most noticeable alterations to the contributing buildings of the historic district. The two stair towers along the interior elevations of the main building's façade return wings obscure portions of the original façade from the main entrance drive (Resource C, 1940). The seismic stabilization towers along the rear of the main building and side elevations of the dining hall building also impact the integrity of the resources because these additions add massing to the buildings and cover originally exposed window openings. The seismic strengthening of portions of the exterior walls of the main and dining hall buildings create additional depth to the window reveals, although the terra cotta spandrels and stucco exteriors of the resources continue to reflect the original design scheme of the exterior elevations. Although these changes all diminish the characteristics of design, materials, and workmanship of the individual resources, they do not significantly diminish these characteristics of the buildings, and the resources continue to contribute to the significance of the historic district. These individual changes can cumulatively impact the integrity of the historic district as a whole. However, even with these modifications, the Marion VA Hospital Historic District retains its ability to convey its significance.

The interiors of the majority of the buildings within the historic district, although not fully investigated, appear to have lost integrity due to alterations made over time to adapt them to changing use and standards in medical care. One exception is the lobby of the main building (Resource 1). Although the flooring and lighting fixtures have been replaced, the lobby of the main building exhibits few other alterations and retains sufficient integrity to contribute to the historic district.

The introduction of additions and buildings to the historic district after the period of significance diminishes integrity of design and setting, especially those with large footprints or massing. The majority of the additions are small, such as the narrow seismic stabilization towers, but three major additions/buildings were constructed after the period of significance within the historic district: the dental/medical building addition (Resource 38, 1988), the education building (Resource 37, 1979), and the outpatient clinical addition (Resource 42, 1998). The dental/medical building addition's impact on the historic buildings is lessened due to its compatible construction materials and sympathetic design. It is also located to the rear of the main building (Resource 1, 1940) and is not visible from the main entrance drive of the historic district. The massing of the dental/medical building addition (Resource 38, 1988) is also subordinate to the original two buildings located on either side: the main building (Resource 1, 1940) to the north and the dining hall (Resource 2, 1940) to the south. The education building (Resource 37, 1979) is a large, single-story, flat-roof building located to the west of the main building and dental/medical building addition (Resource 1 and 38). While this building has a large footprint, the single-story, flat-roof massing and its placement to the west (right side) of the main building lessens its impact to the overall historic district. The outpatient clinical addition (Resource 42, 1998) is located east of the main building and dental/medical building addition and the dining hall building (Resources 1/38 and 2) and is clearly visible from the main entrance drive (Resource C) leading into the historic district. Although it has a substantial footprint, the outpatient clinical addition (Resource 42) is a one-story, flat-roof building that does not dominate the historic

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buildings. The exterior design and massing of the building clearly date to the late twentieth century and differentiate it from the buildings constructed during the period of significance. While the introduction of larger additions diminishes the resource's integrity of design, materials, and workmanship, they do not automatically render the resource noncontributing because the building continues to retain the majority of its character defining architectural details dating to the period of significance and retain sufficient integrity to contribute to the historic district. None of the additions or buildings introduced to the historic district after the period of significance redirect attention from the monumental main building (Resource 1, 1940), with its elaborate Egyptian Revival architectural detail.

Portions of the property currently under control of the Marion Veterans Affairs Medical Center but outside of the historic district have lost integrity, and therefore are not included within the historic district boundary. Sections of the new periphery road were excluded from the historic district boundary, along with new or enlarged parking lots dating to after the period of significance, including a staff parking lot to the south of the post-1950 chiller plant and another large parking lot to the south of the dining hall building (Resource 2) and outpatient clinical addition (Resource 42); a parking lot to the south of the engineering modular building (Resource T-MD-4); and a large parking lot south of the nurses' quarters (Resource 8) that continues to the east, outside the historic district boundary. Buildings and structures that have been erected beyond the historic district boundary after the period of significance include the Illinois American Veterans (AMVET) building and a second large building situated near the nurses' quarters (Resource 8); the community living center, dating to 1985 and exhibiting a large footprint, located east of the outpatient clinical addition (Resource 42); a modular building, dating to 2009, located to the south of the community living center; a garage/storage building situated to the west of the Quonset huts (Resource T-105 through T-109); the replacement water tower, constructed in the 1980s and located southeast of the engineering modular building (Resource T-MD-4); a chiller plant (1998) and another modular office building located to the south-southwest of the historic district boundary; and two modular office buildings, dating to 2011, located to the west-southwest of the education building (Resource 37). A helipad has been constructed to the south of the historic district and a large pond for recreational purposes is situated to the northeast of the community living center, also outside the historic district boundary. These buildings, structures, parking lots, and pond were not included within the historic district boundary because they all date to after the period of significance.

The cumulative effect of modifications to the historic district includes the loss of some buildings and structures, construction of buildings and additions after the period of significance, changes to the historic district's internal circulation pattern, and replacement materials. Even with these cumulative modifications, the historic district continues to convey the historic significance of the hospital during the period of significance. The evolution of the buildings and setting does not reach the point to render the historic district ineligible for listing in the National Register of Historic Places. The historic district retains the majority of resources erected during the period of significance, and also retains integrity of location, setting, design, materials, workmanship, association, and feeling to convey the significance of the historic district. The Marion VA Hospital Historic District continues to relay its sense of time and place as a hospital constructed during the period of significance and its connection to other veterans hospitals of the general medical and surgical sub-type, and is an excellent example of a Period II Second Generation Veterans Hospital that utilizes a unique architectural style among this typology.

Historical Narrative

In December 1934, the American Legion Department Rehabilitation Committee passed a resolution in an effort to persuade the federal government to build a veterans hospital in southern Illinois. Local veterans had long thought that a veterans hospital should be constructed to serve veterans living in the southern portion of the state. The committee agreed to send a request to Frank T. Hines, Administrator of the VA in Washington, D.C., seeking the construction of a 500-bed hospital to serve veterans in southern Illinois and surrounding states. The Federal

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Board of Hospitalization was in charge of determining the locations of federal hospitals. The American Legion Department Rehabilitation Committee sent a letter to the Federal Board of Hospitalization stating its argument for a veterans hospital in southern Illinois. According to the American Legion Department Rehabilitation Committee, over 62,000 veterans lived in southern Illinois and nearly the same number lived in nearby and adjoining states. The committee also indicted the veterans hospital in Danville, Illinois, near the eastern state border with Indiana in the central portion of the state, had been converted to a neuropsychiatric hospital, and therefore no general medical hospital or domiciliary care for veterans was in close proximity to veterans of the area. Members of the Federal Board of Hospitalization initially rejected the petition for the hospital because of adequate facilities in Chicago. Southern Illinois veterans were not deterred. In July 1937, veterans and American Legion posts across southern Illinois successfully lobbied support from Governor Horner to endorse a plan to erect a veteran hospital near Crab Orchard Lake west of Marion, Illinois.⁵³

In June 1938, General Hines and the Federal Board of Hospitalization, after a long campaign by members of the American Legion of southern Illinois, agreed to locate a VA hospital in southern Illinois. The hospital still had to receive federal monetary appropriations and President Franklin D. Roosevelt's approval.⁵⁴ Competition began among the various towns and communities as each attempted to convince the VA to build the hospital at their location. Among the initial towns being considered for the hospital site were Mt. Vernon, West Frankfort, and Harrisburg in southern Illinois. Although located in central Illinois, the communities of Danville, Champaign, Peoria, Decatur, and Mattoon were also being considered as the location for the future veterans hospital. Marion, with a population of 9,033 in 1930, was not initially considered as a probable candidate because it did not meet the VA's minimum population requirement of 10,000 residents.⁵⁵

Members of Marion's numerous civic and fraternal organizations moved quickly to form the Marion Cooperative Club. The club's purpose was to bring the various organizations of Marion together to secure the proposed VA hospital for the town. Backing this cooperative effort were the Masonic Lodge, Elks Club, Rotary Club, Lions Club, and the Trades and Labor Council, among others. A committee was created to greet and escort the federal site selection representatives upon their visit to Marion.⁵⁶

In early September 1938, a four man delegation of Marion business and professional leaders travelled to Washington, D.C., to present Marion's bid for the hospital during a special hearing. Illinois Congressman for the Twenty-fifth Congressional District, Kent E. Keller, accompanied the Marion delegation to the hearing that included VA administrator Frank T. Hines. Eleven other presentations were made before the committee in an effort to have the hospital located in their respective Illinois communities.⁵⁷ As a result of Marion's presentation, it was placed on the list of sixteen towns to be inspected by VA representative and engineer Major W.R. Metz in late September 1938. Metz later reported that he was "much impressed" with the Blankenship tract of land on Route 13 west of Marion following his visit to the area.⁵⁸ General G.A. Wood of the Board of Hospitalization

⁵³ "Veterans Request 500-Bed Southern Illinois Hospital," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 3; Robinson E. Adkins, *Medical Care of Veterans* (Washington, D.C.: U.S. Government Printing Office, 1967), 398; "First Major Disappointment," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 3.

⁵⁴ "General Hines Endorses Plans," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 3.

⁵⁵ "Marion Citizens Take Action," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 4.

⁵⁶ "Forms Marion Cooperative Club," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 3.

⁵⁷ "Marion Citizens Take Action," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 4.

⁵⁸ "Keller Pledges to Get Hospital for Marion," "VA Hospital 31st Anniversary Edition," *Marion Daily Republican*, October 11, 1973, 4.

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made a second inspection of probable southern Illinois sites, including Marion, in November 1938.⁵⁹ By January 1939 the VA had still not decided on a location for the facility. The VA's inaction prompted the Marion newspaper editor to suggest in early 1939 that American Legion members begin a letter writing campaign to all U.S. Congressional representatives of Illinois, Kentucky, Indiana, and Missouri regarding the need for a VA hospital in southern Illinois. Letters and telegrams were sent to Congressional offices in support of Marion from not only the local American Legion, but also numerous local business owners and business professionals. In March 1939, VA engineer, Major W.R. Metz, returned with administrator Frank T. Hines and Colonel M.H. Tripp, Director of Construction for the VA, to inspect possible sites in Marion, Lawrenceville, Mt. Carmel, Harrisburg, West Frankfort, Mt. Vernon, and Effingham. After the field inspections, only two candidates remained: Mt. Vernon and Marion.⁶⁰

On April 11, 1939, official notification was received that Marion had been selected as the site of the new VA hospital.⁶¹ To celebrate the occasion, on April 27, 1939, Marion hosted a "hospital jubilee celebration" that began with a parade of several thousand participants marching from South Court Street to the fairgrounds.⁶² Numerous civic and political dignitaries, such as Congressman Keller, were on hand to celebrate along with members of the community.⁶³

The work of negotiating for acquisition of the property and site planning began at once. On May 11, 1939, VA engineer Major W.R. Metz arrived in Marion and met with land owners to discuss purchase prices for the necessary tracts of land for the proposed hospital. Metz also worked with city officials on the requirements of the city, namely the closure of a county road that passed through the site, extension of city utilities and city limits to the east side of the property, improvement of roads along the eastern and southern limits of the site, and the transfer of the 1.5-acre Mission School property to the federal government at no cost. On August 19, Marion mayor Harry Crisp received notice that the federal government had accepted the terms of the land owners and agreed to purchase the 341.25 acres for \$47,695. Land owners whose land was purchased included S.E. and Cora E. Blankenship (\$8,500), Robert Sparks (\$6,920), Will Trentleman (\$4,750), Mr. and Mrs. Leonard Matheny (\$1,250), Sam Stearns (\$21,375), and C.S. Barnett (\$4,800).⁶⁴

Following a visit to the area after the June 25, 1939, ground breaking ceremony, Frank Hines, administrator of the VA, recommended that the exterior architectural styling of the hospital reflect the regional heritage of southern Illinois, which was also referred to as Egypt or Little Egypt. As a result, Hines ordered that the exterior design, originally to have been constructed in the Classical Revival style, be changed to reflect the Egyptian Revival style, with a large copper pyramid atop the main hospital, bright polychromatic terra-cotta tiles with lotus leaves, and the use of other Egyptian motifs. Although unclear, VA staff architect L.E. Twery may have been

⁵⁹ "Inspected Three Times Before Decision Came," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 5. "Veterans Hospital Site Still 'Up In The Air,'" *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 4.

⁶⁰ "Washington Flooded With Letters and Telegrams," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 5; "Gen. Hines Made Secret Inspection of Marion," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 5; "Inspected Three Times Before [sic] Decision Came," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 5.

⁶¹ "Ten Year Fight for New Veterans Hospital Ends in Victory for Marion," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 6.

⁶² "Thousands Participate in Jubilee Celebration," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 6.

⁶³ "Thousands Participate in Jubilee Celebration," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 6.

⁶⁴ "Negotiating For Acquisition of Property," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 7.

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responsible for designing the decorative elements associated with Marion's Egyptian Revival styling found of the exterior of the main building. L.E. Twery appears as the designer on many of the original drawings of the exterior details for the main building but not the residential buildings.⁶⁵

The Marion hospital complex was designed to be a regional facility for general medical and surgical patients, and included large domiciliary buildings for veterans. Original plans called for the construction of eleven buildings and the water tower. The initial eleven buildings were to include the main building; dining hall building; attendants' quarters; nurses' quarters; a large domiciliary for 366 veterans; two officer's duplexes; the water tower; the storehouse; boiler house; laundry; and station garage. Eight buildings were planned for future expansion, including three large domiciliary buildings, a combined dining hall/recreation building for the domiciliary buildings, two garages for the staff residences, a residence for the medical officer-in-charge or officer's duplex, and an incinerator. Large additions were also planned for the main building, the attendants' quarters, and the nurses' quarters. A number of these buildings, especially those for future expansion, were never constructed because of increasing construction costs. Faced with higher than expected building expenses, original plans had to be scaled back in June 1941 when a lack of funds made it necessary to eliminate five buildings from the initial plans. Construction focused on the main hospital building (Resource 1, 1940) with a capacity of 160 beds, a dining hall building, nurses' quarters for fourteen nurses and a head nurse, an attendants' quarters (Resource 13, 1940) containing twenty-eight beds, a boiler house, station garage, storehouse, and a 200,000 gallon steel water tower.⁶⁶

On September 12, 1939, surveyor George H. Anderson of Herrin, Illinois, was awarded the contract to conduct a boundary and topographic survey of the tract in preparation for the construction of the hospital buildings. Around this same time the bids solicited by the federal government for the construction of the facility were received and found to be in excess of the available funding set aside for the project.⁶⁷ Watson Miller, director of the National Rehabilitation Service, cited contractor cautiousness resulting from an anticipated surge in national defense spending and possible labor and material shortages.⁶⁸ As a result, the original plans were altered, and new bids were opened on October 9, 1940. A number of the originally planned buildings were eliminated

⁶⁵ "General Hines Approves Egyptian Motif," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 7; *Veterans Administration Hospital Marion, Illinois: 31st Anniversary, October 13-14, 1942-1973*, 8, located in historical scrapbooks, Public Affairs Office, Marion Veterans Affairs Medical Center, Marion, Illinois; Robert A. Ryan, Historic American Building Survey, "Veterans Administration Medical Center, Old State Route 13 West, Marion, Williamson County, Illinois, HABS No. IL-1155" (Dennett, Muessig, Ryan and Associates, Ltd., 1989): 6-8, located on the World Wide Web on the Library of Congress website, "Historic American Buildings Survey," <http://lcweb2.loc.gov/pnp/habshaer/il/il0500/il0575/data/il0575data.pdf>, accessed February 2011; United States Department of Veterans Affairs, files of the Facilities Management Services, Marion Veterans Affairs Medical Center, Marion, Illinois.

⁶⁶ "More Cutbacks In Original Plans," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 7; Robert A. Ryan, Historic American Building Survey, "Veterans Administration Medical Center, Old State Route 13 West, Marion, Williamson County, Illinois, HABS No. IL-1155" (Dennett, Muessig, Ryan and Associates, Ltd., 1989): 7-8, located on the World Wide Web on the Library of Congress website, "Historic American Buildings Survey," <http://lcweb2.loc.gov/pnp/habshaer/il/il0500/il0575/data/il0575data.pdf>, accessed February 2011; United States Department of Veterans Affairs, files of the Facilities Management Services, Marion Veterans Affairs Medical Center, Marion, Illinois.

⁶⁷ "Surveyor Bid Awarded," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 7; "First Bids too High," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 7; Robert A. Ryan, Historic American Building Survey, "Veterans Administration Medical Center, Old State Route 13 West, Marion, Williamson County, Illinois, HABS No. IL-1155," (Dennett, Muessig, Ryan and Associates, Ltd., 1989), 8 located on the World Wide Web on the Library of Congress website, "Historic American Buildings Survey," <http://lcweb2.loc.gov/pnp/habshaer/il/il0500/il0575/data/il0575data.pdf>, accessed February 2011.

⁶⁸ "First Bids too High," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 7.

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from the initial construction phase. Construction for the buildings and utilities was awarded to Ring Construction Company of Minneapolis, Minnesota (\$1,247,000); the steel water tank and tower construction was awarded to Chicago Bridge and Iron Company, Washington, D.C. (\$19,375); the winning bid for the refrigerating equipment was from National Korectaire Company, Chicago, Illinois (\$19,000); and the bid for installation of the electric elevator went to the Haughton Elevator Company, Washington, D.C. (\$33,280). Immediately following the acceptance of its bid, Martin Ring of Ring Construction Company arrived in Marion to stake out sites for the seven buildings. Excavation began shortly afterward.⁶⁹ Annexation of the land between South Carbon and the hospital site, West Main (Route 13), and extension of West Maulden Street occurred in December 1939. This moved the city limits adjacent to the property of the Marion VA Hospital, as was stipulated in the original agreement between the City of Marion and the federal government.⁷⁰

Throughout the early spring of 1941, construction of the original seven buildings at the Marion facility progressed ahead of schedule despite shortages of many materials as a result of national defense needs. The outbreak of war in Europe led to shortages and increased costs on steel and other construction items.⁷¹

The concrete footings for the power house (Resource 14) were poured in late March 1941.⁷² The main hospital building was to be four stories tall, approximately 100 feet high and 140 feet wide. The beams, piers, and floors were all poured in place concrete. The exterior walls are composed of structural hollow tile filling the voids in the concrete supports, with brick along the exterior walls. The brick was then covered in stucco. The main building (Resource 1) was to have a capacity for 165 hospital beds. According to a newspaper article, the structure was designed to be able to accommodate additional wings if needed.⁷³ Martin Ring of Ring Construction Company indicated in a local newspaper story in March 1941 that "One million bricks, 800 tons of steel, 50,000 sacks of cement and 150,000 square feet of building tile will be included in materials which will go into the hospital construction."⁷⁴ By mid-April 1941, the Ring Construction Company was expecting the decorative terra cotta to be delivered to be used in the exterior ornamentation for the Egyptian Revival style exteriors of the buildings. The local newspaper noted that the main hospital building "will be truly Egyptian in style and color" using "Egyptian motifs, with very bright reds, yellow, blues, and greens."⁷⁵ The concrete floor of the west wing of the main building (Resource 1) was expected to be poured in late April 1941.⁷⁶ Delays were incurred in mid-April due to water and mud filling the basements of the attendants' quarters (Resource 13) and boiler house (Resource 14). Steel for the hospital's 200,000-gallon water tank had arrived, but no work had begun on its assembly. Once assembled the hospital's water tank would have twice the capacity as the Marion city water tank. Construction on the nurses' quarters (Resource 8) had not begun by April 1941.⁷⁷

⁶⁹ "New Bids \$160,000 Lower," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 7; "More Cutbacks In Original Plans," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 7.

⁷⁰ "Annexation Involves 160 Families," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 7.

⁷¹ Robert A. Ryan, Historic American Building Survey, "Veterans Administration Medical Center, Old State Route 13 West, Marion, Williamson County, Illinois, HABS No. IL-1155" (Dennett, Muessig, Ryan and Associates, Ltd., 1989): 7, located on the World Wide Web on the Library of Congress website, "Historic American Buildings Survey," <http://lcweb2.loc.gov/pnp/habshaer/il/il0500/il0575/data/il0575data.pdf>, accessed February 2011; "Working on All Buildings For the Marion Veteran Facility at Present Time," *Marion Daily Republican*, July 19, 1941, 1.

⁷² "Fine Progress on Hospital," *Marion Daily Republican*, March 28, 1941.

⁷³ "Hospital Ahead of Schedule," *Marion Daily Republican*, March 6, 1941; United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

⁷⁴ "Hospital Ahead of Schedule," *Marion Daily Republican*, March 6, 1941.

⁷⁵ "Bright Colors For Hospital," *Marion Daily Republican*, April 16, 1941.

⁷⁶ *Ibid.*

⁷⁷ "Bright Colors For Hospital," *Marion Daily Republican*, April 16, 1941; "Workmen Busy at Hospital," *Marion Daily*

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By late May 1941 steel workers had placed the last rivet in the steelwork for the pyramid-shaped central tower of the main building (Resource 1) and hoisted an American flag atop its peak 104 feet above the ground. Waterlines and fire hydrants were also being completed across the facility in late May. During this same period, grading for Commander Drive leading from Route 13 to the front of the main building had begun.⁷⁸ The following June, additional road grading was occurring across the facility, the exterior brick on the dining hall (Resource 2) and connecting corridor was nearly completed, and terra cotta and brickwork on the main building (Resource 1) had reached the third floor. By mid-June, the forms for pouring the concrete for the basement of the nurses' quarters (Resource 8) were in place and the second and top floors of the attendants' quarters were set for their concrete pour. In the maintenance/utility section on the eastern portion of the campus grounds, work was progressing at the same pace, with steelwork being completed on the boiler house (Resource 14) and work had begun on laying the exterior brick walls of the garage (Resource 15).⁷⁹

On July 20, 1941, before completion of the hospital complex, a small copper plaque was unveiled during the official dedication ceremony at the Marion VA Hospital. The plaque was placed to the left of the main entrance of the hospital building (Resource 1) by General Frank Hines, Administrator of the Veterans Administration. The editor of the *Egyptian Legionnaire*, Ray Hubbs, realized there was no cornerstone for the main building and proposed that a plaque be readied for the dedication. Designed by John Garrison of Marion, the plaque was donated by the Past Commanders Club of the Fifth Division of the American Legion, which included American Legion posts located in southern Illinois. In reference to the Egyptian Revival theme of the building, the plaque has a bas-relief image of a sphinx within a pyramid which is surrounded by images of select area industries, including images pertaining to coal mining, oil wells, factories, and orchards. No provision for a cornerstone was made during the construction of the facility. The dedication plaque was designed with a copper envelope on the back into which were placed items typically reserved for cornerstones, and the plaque was securely sealed to the exterior of the building prior to its completion. Attending the ceremony were Governor Dwight H. Green, former governor John Stelle, former congressman Kent E. Keller, and VA and American Legion dignitaries. Preceding the unveiling program for the plaque, an estimated 10,000 spectators were entertained by a parade 2 miles in length. A newspaper article also estimated that 12,000 visitors viewed the exteriors of the hospital buildings prior to the dedication.⁸⁰

By November 1941 work was nearing completion on the facility buildings and grounds. Interior work, such as plaster, terrazzo floors, and installation of elevators and equipment, was being finalized. The facility grounds were also taking shape. Concrete roadways were being poured, building exteriors had received their final coat of stucco, and the flag pole (Resource 21, 1940) at the entrance to the main building (Resource 1) had been completed. Among the construction projects still underway were the erection of the steel water tank and of the boiler house's nearly 180-foot tall masonry chimney. The boiler house's chimney, a landmark at the facility until its demolition on September 10, 1971, was buff colored and topped with a broad band of red stucco.⁸¹

Republican, May 27, 1941.

⁷⁸ "Flag Flying Over Hospital," *Marion Daily Republican*, May 31, 1941; "Workmen Busy at Hospital," *Marion Daily Republican*, May 27, 1941.

⁷⁹ "Continue Work on the Hospital," *Marion Daily Republican*, June 17, 1941.

⁸⁰ Correspondence, Oldham Paisley, Marion, Illinois to Secretary B.B. Caddle, Copper and Brass Research Association, New York City, New York, August 23, 1941, located in historical vertical files, Public Affairs Office, Marion Veterans Affairs Medical Center, Marion, Illinois; "Plaque, Placed At Entrance to Veterans Hospital Which Will Be Unveiled By General Frank T. Hines In Marion On Sunday Afternoon, July 20," *Marion Daily Republican*, July 11, 1941; "Dedication of Bronze Plaque," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 8; Wilma B. Roth, "VA Medical Center Serves Area; Visit The Hospitalized Veterans," unknown newspaper, November 8, 1978, 16.

⁸¹ "Chimney Top Will Be Red," *Marion Daily Republican*, November 1, 1941; United States Department of Veterans

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In early December 1941, the storehouse building (Resource 16) was the first of the campus buildings completed and accepted by Superintendent J.J. Halter on behalf of the federal government. The remaining buildings in the Marion VA Hospital were noted as being 80 percent complete in a newspaper article. The newspaper article also indicated the facility was scheduled for completion by February 2, 1942, as workers rushed to complete facility paving, heating system installation, and interior painting.⁸² The interior marble work of the main building (Resource 1) used supreme colorless travertine for wainscoting, and dark Tennessee marble was utilized at the base and as flooring border.⁸³ Plans for the formal dedication of the hospital complex in May 1942 were delayed until the completion of landscaping. Landscaping of the facility was accomplished by sixty laborers working under the Works Progress Administration (WPA). One source indicates these laborers were veterans. The funds for the landscaping, amounting to \$63,138, were raised by donations from area veterans groups. Numerous trees, including flowering dogwoods and American sweet gum trees, were planted across the facility.⁸⁴ Planting plans dating to 1942 are located in the Facilities Management Services office of the Marion Veterans Affairs Medical Center. One of the plans depicts a pioneer garden and an outdoor theater, while other drawings show planting plans near the new buildings of the hospital campus. The pioneer garden and outdoor theater were to be built to the northwest of the main hospital building, but neither of these outdoor spaces appear to have been constructed.⁸⁵ Over the decades since its construction, trees and monuments have been planted or placed on the hospital grounds by dignitaries and veterans alike, honoring historic milestones or significant events that have shaped the lives of Illinois veterans or the facility's development.

The Marion VA Hospital was open to the public in early June 1942 and approximately 2,600 visitors inspected the facility. The main building (Resource 1) had a capacity of 160 beds in 1942 with rooms containing single beds and wards with between two and eight beds. Two operating rooms were located on the fourth floor. Other facilities located in the main building were the x-ray, dental, and laboratory services; hydrotherapy services; pharmacy; a chapel; and a mortuary. The dining hall building (Resource 2) included the kitchen, storage space, dining halls for staff members and patients, and a recreation hall/auditorium. The operating rooms and the recreation hall/auditorium were air conditioned. The capacity of the main building was increased by fifty-four emergency beds to alleviate increased patient loads brought about by returning World War II veterans.⁸⁶ According to a 1946 newspaper article, "The original staff consisted of 8 physicians, 28 nurses, 26 ward attendants and 113 other employees."⁸⁷ The first patient, retired Carterville physician Dr. Andrew John Aird, was admitted on June 8, 1942. On April 19, 1943, the Marion VA Hospital admitted its 1,000th patient since it had become operational in 1942. Perhaps one of the most important patients to be admitted was Tony Loveless, the

Affairs, located in the files of the Public Affairs Office, Marion Veterans Affairs Medical Center, Marion, Illinois.

⁸² "First Building of Veterans' Hospital Group at Marion is Accepted," *St. Louis Globe-Democrat*, December 9, 1941.

⁸³ "Veterans Hospital Has had 26,000 Patients in 14 Years," *Marion Daily Republican*, May 13, 1954, 6.

⁸⁴ "Delay in Construction and Landscaping Postpones Vets Hospital Dedication," *Marion Evening Post*, May 4, 1942; *Discover VAMC Marion: 1942-1992, 50 Years of Caring*, "Little Known VAMC Facts," 2, located in historical scrapbooks, Public Affairs Office, Marion Veterans Affairs Medical Center, Marion, Illinois; Robert A. Ryan, *Historic American Building Survey*, "Veterans Administration Medical Center, Old State Route 13 West, Marion, Williamson County, Illinois, HABS No. IL-1155" (Dennett, Muessiq, Ryan and Associates, Ltd., 1989): 9, located on the World Wide Web on the Library of Congress website, "Historic American Buildings Survey,"

<http://lcweb2.loc.gov/pnp/habshaer/il/il0500/il0575/data/il0575data.pdf>, accessed February 2011.

⁸⁵ United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

⁸⁶ "2600 Visitors At Hospital On Thursday," *Marion Daily Republican*, June 5, 1942; "First Building of Veterans' Hospital Group at Marion is Accepted," *St. Louis Globe-Democrat*, December 9, 1941; "Marion Hospital Opened in 1942," *Marion Evening Post*, September 3, 1946.

⁸⁷ *Marion Evening Post*, "Marion Hospital Opened in 1942," September 3, 1946.

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veteran who championed the creation of the Marion VA Hospital throughout the 1930s. Loveless died at the facility on June 30, 1948.⁸⁸

Staffing shortages during World War II occurred at the facility. In the early months of the war, the facility had only three attending physicians on staff. As the staff increased after the war, additional office space was created in the main building and through the addition of temporary Quonset huts. New services offered to veterans also increased staff numbers. According to a 1946 newspaper article, medical rehabilitation and occupational therapy services had been added to the facility after the end of the war.⁸⁹ By 1947 the hospital had treated 14,575 cases mostly consisting of World War II veterans.⁹⁰

Newspaper articles detailing the twelfth anniversary of the Marion VA Hospital in 1954 indicate that the hospital served 26,000 veterans since it opened in 1942. Additionally thousands of outpatient visits had taken place at the hospital. In May 1954 the staff of the Marion VA Hospital totaled 348 employees, requiring a payroll of nearly \$1 million. Besides employees, of which nearly 80 percent were veterans or the widows of veterans, the hospital was supported by approximately 100 volunteers. The majority of employees lived in Williamson County. The Marion VA Hospital did not treat female patients in 1954; instead, they were referred to other VA hospitals located in St. Louis, Louisville, and Indianapolis. This practice had ceased by the early 1970s, with the hospital serving both male and female veterans. With a capacity of 176 beds, the Marion VA Hospital was comprised of four wards in 1954 and continued to be designated a general medical and surgical hospital. The hospital treated veterans living in southern Illinois, northwestern Kentucky, western Indiana, and northern Tennessee.⁹¹

The 1950s began a period of reduction in land ownership by the VA at Marion. In 1939 the facility was planned as a much larger facility. The inability to fund the planned development at Marion resulted in the complex never reaching its originally intended operational size. As such, the VA sought to sell land that was viewed as excess or surplus to the mission of the Marion VA Hospital. By May 1954, the original allotment of 341 acres had been reduced to 203 acres following the sale of 137 acres to Harry Crisp in 1950. In 1955 the VA announced plans to sell three parcels: 71.9 acres to the south of the hospital, 26.9 acres between the hospital and the Crisp property, and 24.1 acres in the northeast section of the facility. This sale would have reduced the hospital grounds to 80 acres, and many were worried that a reduction of the site would lessen the chances of further expansion and would diminish the appearance of the facility. Alerted to the proposed sale, veterans groups and Marion residents protested, forcing the VA to back away from the proposal. The sale of sections of hospital lands was a point of serious contention between the veterans organizations, such as the American Legion, and the VA administrators and facility managers. Over 27 acres of the western portion of the reservation was transferred to the State of Illinois in 1957 for the construction of Interstate 57. In the 1960s a plan by the VA to sell over 60 acres of the Marion facility deemed excess by the federal government was halted by a letter writing campaign begun by veterans and the *Marion Daily Republican* newspaper in opposition to the sale. The Marion VA Medical Center was determined eligible for listing in the National Register of Historic Places (NRHP) in 1980, although it was not formally listed in the NRHP. Another proposed sale of 25 acres fronting State Route 13 at the northeast portion of the Marion VA Medical Center grounds in 1983/1984 again prompted public opposition. In 1984, the

⁸⁸ Stan J. Hale, *Williamson County, Illinois, Sesquicentennial History* (Paducah, Kentucky: Turner Publishing Company, 1993), 495; Shannon Woodworth, "VA Medical Center is alive and well," *Marion Daily Republican*, December 23, 1992; "Tony Loveless Died In Hospital He Urged For Veterans," *Marion Daily Republican*, "VA Hospital 31st Anniversary Edition," October 11, 1973, 8.

⁸⁹ "Marion Hospital Opened in 1942," *Marion Evening Post*, September 3, 1946, 2.

⁹⁰ Shannon Woodworth, "VA Medical Center is alive and well," *Marion Daily Republican*, December 23, 1992.

⁹¹ "Veterans Hospital Has had 26,000 Patients in 14 Years," *Marion Daily Republican*, May 13, 1954, 6; *Veterans Administration Hospital Marion, Illinois: 31st Anniversary, 1942-1973*, 9, located in historical scrapbooks, Public Affairs Office, Marion Veterans Affairs Medical Center, Marion, Illinois.

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General Services Administration entered into an agreement with the Illinois State Historic Preservation Office and the Advisory Council on Historic Preservation to place protective covenants on the parcel to protect the vista of the historic district at the Marion VA Hospital. Additional acreage has been transferred from the control of the VA, including 11 acres to the State of Illinois in the northern portion of the former property; 61.5 acres in the southern portion of the former VA property that was deeded to the Community Unit School District No. 2; and approximately 22 acres to the City of Marion in the northeastern portion of the property formerly controlled by the VA.⁹² The Marion Veterans Affairs Medical Center currently retains control of approximately 76 acres.⁹³ Currently the former grounds of the VA facility that have been removed from hospital ownership are occupied by a variety of interests, including the Marion Chamber of Commerce and the State of Illinois, which maintain office buildings north of the Marion VA Hospital along State Route 13, and the New Hope United Methodist Church and DiVita Dialysis Center along South Fourth Street at the northeast corner of the facility's former land holdings.

Between 1965 and the first three months of 1973, when the Marion VA Hospital was celebrating its thirty-first anniversary, the hospital had treated over 25,000 inpatients. Over 50,000 outpatient visits were recorded over the previous four years. In 1973 the hospital served veterans living in southern Illinois, western Kentucky, and portions of Indiana. Improvements to the Marion VA facility began in the early 1970s with a \$2.9 million modernization program. The major remodeling and renovation project equipped the main building (Resource 1) with air conditioning for patient comfort, installed new elevators, updated lighting systems, replaced tile floor covering in the interior areas (including entry and elevator lobbies), relocated nursing stations, improved oxygen supply systems, developed a six-bed intensive care unit, and updated electrical systems by acquiring a new emergency generator.⁹⁴

In late 1972 the Marion VA Medical Center became affiliated with the Southern Illinois University-Carbondale School of Medicine. The Marion Veterans Affairs Medical Center has seen a number of improvements and additions to its campus since 1973. In late 1978 the hospital had a capacity of 171 beds and an average occupancy rate of 145 beds. In December 1979 a new building, Resource 37, was constructed to the west of the main building (Resource 1). The new one-story building served as the home of the Southern Illinois University School of Medicine Education Building to the Marion VA Medical Center. Groundbreaking ceremonies for the new structure were held on May 10, 1978. Classrooms, offices, and a small library were some

⁹² "Veterans Hospital Has had 26,000 Patients in 14 Years," *Marion Daily Republican*, May 13, 1954, 6; *Veterans Administration Hospital Marion, Illinois: 31st Anniversary, 1942-1973*, 8, located in historical scrapbooks, Public Affairs Office, Marion Veterans Affairs Medical Center, Marion, Illinois; Untitled article, *Marion Daily Republican*, July, 1964; United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois; "Stop, Now, A New Plan to Ruin the Veterans Hospital View," *Marion Daily Republican*, July 7, 1964; "Many Object to Disposal of Hospital Land," *Marion Daily Republican*, July 16, 1964; "VA Hospital Land Will Not Be Sold," *Marion Daily Republican*, July 14, 1964; *Memorandum of Agreement*, March 22, 1984, located in files of Medical Media Department, Marion Veterans Affairs Medical Center, Marion, Illinois; Gjore J. Mollenhoff and Karen R. Tupek, Veterans Administration Medical Center (Marion, Illinois) National Register of Historic Places Determination of Eligibility, Veterans Administration, Washington, D.C. 1980, located in the files of the United States Department of Veterans Affairs, Historic Preservation Office, Office of Construction and Facilities Management, Washington, D.C.; United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois; *Williamson County, Illinois Land Atlas & Platbook* (Battle Lake, Minnesota: Accurate Publishing & Printing, Inc., 1991): 16.

⁹³ United States Department of Veterans Affairs, files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

⁹⁴ *Veterans Administration Hospital Marion, Illinois: 31st Anniversary, 1942-1973*, 9, 33, located in historical scrapbooks, Public Affairs Office, Marion Veterans Affairs Medical Center, Marion, Illinois.

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of the features to be found in the new education facility.⁹⁵ Currently, Resource 37 houses the prosthetics and information resource management (IRM) services of the Marion Veterans Affairs Medical Center.

Major construction projects were undertaken in the 1980s that included seismic upgrades to the main and dining hall buildings (Resources 1 and 2, both 1940), and the construction of new facilities, including the dental/medical building addition to the main building (Resource 1 and 38), the nursing home facility, a replacement water tower, and a telephone building. On May 25, 1983, ground was broken on a \$3.2 million, 60-bed extended care facility designed to assist veterans needing long term care.⁹⁶ The nursing home was constructed by Albers Construction Company of Breese, Illinois. Completed in 1985, the facility was constructed to alleviate the increased needs of aging veterans requiring long term health care. In 1985, 16,500 veterans nationwide were in VA nursing facilities. This figure is a dramatic increase from the 8,900 veterans in VA nursing homes in 1983 and the 6,400 veterans being served in VA nursing homes in 1974. The construction of the nursing home facilities, like the one at Marion, marked a growing trend among the 174 VA centers nationwide in the 1980s.⁹⁷ According to a newspaper article, the original 28,000 square foot facility contained "therapy rooms, television lounges, recreation room, dining room, staff lounge and quiet rooms. A courtyard in the center of the facility allows all of the one-, two- and four-bed rooms to have a window."⁹⁸ In subsequent years, a fence-enclosed outdoor recreational area was added, featuring outdoor pavilions, a deck overlooking a large pond, and walking and garden areas. Since its completion, the nursing home center, currently referred to as the community living center, has been expanded to its present 36,185 square feet.⁹⁹ By August 1988 the medical center employed nearly 450 staff members, including both full and part-time employees.¹⁰⁰

In 1988 the multi-story dental/medical addition referred to by the facility as Building 38 was constructed. This three-story addition is located between the main building (Resource 1, 1940) and the dining hall building (Resource 2, 1940) in an area once occupied by a covered corridor connecting the two buildings. Currently the dental/medical building addition contains nearly 25,000 square feet of space.¹⁰¹ Retrofitting of several buildings for seismic upgrades and the replacement of the original steel water tower took place in 1988. In October 1988 the VA awarded a \$3.9 million seismic upgrade contract to Interstate Landscaping Company, Incorporated. Under the construction plan, steel reinforced seismic towers or sheer walls were placed on the exterior walls of the main and dining hall buildings (Resources 1 and 2); the boiler house was upgraded for seismic protection; and the original 1940s steel water tower was replaced by the present water tower designed to withstand earthquakes.¹⁰² The J&W

⁹⁵ Wilma B. Roth, "VA Medical Center Serves Area; Visit The Hospitalized Veterans," unknown newspaper, November 8, 1978; United States Department of Veterans Affairs, "History, VA Medical Center, Marion, IL 62959," 1978, located in the files of the United States Department of Veterans Affairs, Historic Preservation Office, Office of Construction and Facilities Management, Washington, D.C.; "Groundbreaking," *Marion Daily Republican*, May 1978, Vol. 66, No. 41: 1.

⁹⁶ J. Majerus, "Medical Center Gets Earthquake Funds," *Marion Daily Republican*, October 5, 1988; "VA Medical Center Moves Ahead," *Marion Daily Republican*, March 29, 1990; J. Majerus, "Marion Firm Completes Work on New VA Telephone Building," *Marion Daily Republican*, August 9, 1989; "Welcomes Care Unit," *Marion Daily Republican*, May 26, 1983; Vicki Fry, "Nursing Home Designed to Enable VA to Better Serve Older Veterans," *Marion Daily Republican*, August 15, 1985.

⁹⁷ "Construction Continues," *Marion Daily Republican*, December 4, 1984; "Nursing Home Designed to Enable VA to Better Serve Older Veterans," *Marion Daily Republican*, August 15, 1985.

⁹⁸ "Nursing Home Designed to Enable VA to Better Serve Older Veterans," *Marion Daily Republican*, August 15, 1985.

⁹⁹ "Capital Asset Inventory, 2010 Survey, Marion VA Medical Center," provided by Engineering Office, Marion Veterans Affairs Medical Center, Marion, Illinois.

¹⁰⁰ Carol Johns, "VA Medical Center..A Local Asset," *Homemaker Newspaper* (Marion, Illinois), August 12, 1985.

¹⁰¹ "Capital Asset Inventory, 2010," United States Department of Veterans Affairs, located in the files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois.

¹⁰² "Marion VA Hospital to Undergo \$5 Million 'Earthquake-Proofing,'" *Southern Illinoisan*, January 13, 1984; "Medical

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Allen Construction Company completed a new 1,200 square foot building to house the facility's phone system in August 1989.¹⁰³

In 1990 the Marion VA Hospital was equipped with 171 beds. Twenty-three medical services were supplied by the hospital to veterans, "including internal medicine, general surgery, cardiology and optometry."¹⁰⁴ The 1990s also saw continued growth of the medical center. In August 1994 a \$15.7 million contract was awarded to RNJ Interstate Landscaping Company of Harrisburg, Illinois, to construct a 65,000 square foot clinic and remodel 6,500 square feet of existing building space. Scaled back from an original \$23 million plan developed two years prior, the new outpatient clinic was to include a pharmacy, services related to radiology, nuclear medicine, and laboratory services, outpatient administration, services attributed to ambulatory care, and space for the facility police headquarters. Remodeled areas in the adjacent east wing of the main building (Resource 1, 1940) were redesigned to house an eye clinic, cardiology, respiratory care, and services related to the audiology/speech department. Other construction projects undertaken under this plan included the construction of a new chiller plant for air conditioning, an emergency electrical generator (Resource 50) attached to the outpatient clinical addition (Resource 42), remodeling of the loading dock on the dining hall building (Resource 2), and creating a new perimeter road system.¹⁰⁵ The construction project was completed in 1998.

Construction continued in the first decade of the twenty-first century. Between 2005 and 2009, three modular buildings were completed and occupied by management, quartermaster, and engineering divisions of the medical center. The one-story modular units ranged from 2,100 to 10,000 square feet.¹⁰⁶ At present, two additional buildings are being constructed at the facility adjacent to the nurses' quarters (Resource 8). These include the American Veterans (AMVETS) Building under construction by Ribeiro Construction Company, Incorporated, and the mental health administrative office building under construction by Holland Construction Services. Two additional modular buildings have also been constructed to the west-southwest of the education building (Resource 37).

Center Gets Earthquake Funds," *Marion Daily Republican*, October 5, 1988; "Harrisburg Firm Gets VA Hospital Contract," *Southern Illinoisan* (Carbondale, Illinois), October 8, 1988; "VA Medical Center Moves Ahead," *Marion Daily Republican*, March 29, 1990.

¹⁰³ "Marion Firm Completes Work on a New VA Telephone Building," *Marion Daily Republican*, August 9, 1989.

¹⁰⁴ "VA Medical Center Moves Ahead," *Marion Daily Republican*, March 29, 1990.

¹⁰⁵ Richard Darby, "VA Center's Largest Expansion to Begin," *Marion Daily Republican*, September 1, 1994.

¹⁰⁶ "Capital Asset Inventory, 2010," United States Department of Veterans Affairs, located in the files of the Facilities Management Services of the Marion Veterans Affairs Medical Center, Marion, Illinois; Shannon Woodworth, "VA Center Looks Forward to \$23 Million Project," *Marion Daily Republican*, n.d.

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U.S. Second Generation Veterans Hospital
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Southern Illinoisan (Carbondale, Illinois). "Harrisburg Firm Gets VA Hospital Contract." October 8, 1988.

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United States Department of Veterans Affairs. "Capital Asset Inventory, 2010 Survey, Marion VA Medical Center." Files of the Facilities Management Services, Marion Veterans Affairs Medical Center, Marion, Illinois.

United States Department of Veterans Affairs. Correspondence, Oldham Paisley, Marion, Illinois to Secretary B.B. Caddle, Copper and Brass Research Association, New York City, New York, August 23, 1941. Located in historical vertical files, Public Affairs Office, Marion Veterans Affairs Medical Center, Marion, Illinois.

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United States Department of Veterans Affairs. "History, VA Medical Center, Marion, IL 62959," 1978. Located in the files of the United States Department of Veterans Affairs, Historic Preservation Office, Office of Construction and Facilities Management, Washington, D.C.

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Veterans Administration Hospital Marion, Illinois: 31st Anniversary, October 13-14, 1942-1973. Located in historical scrapbooks, Public Affairs Office, Marion Veterans Affairs Medical Center, Marion, Illinois.

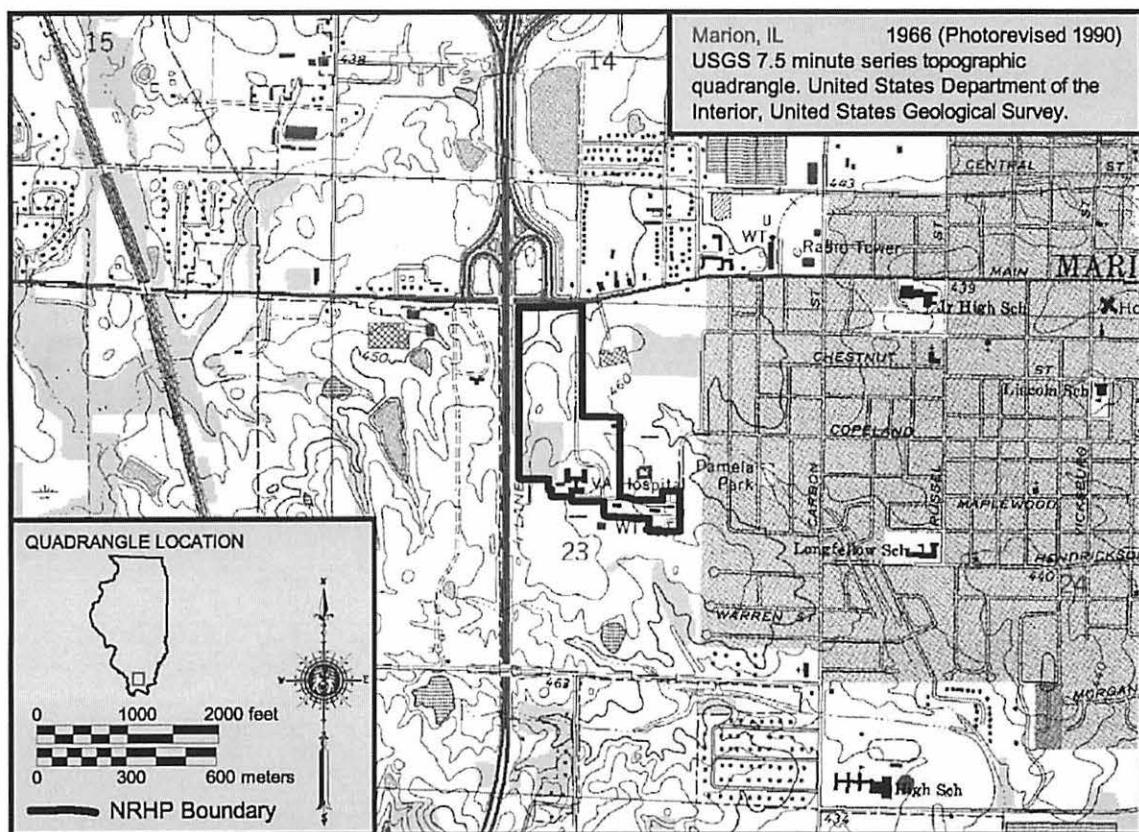
Williamson County, Illinois Land Atlas & Platbook. Battle Lake, Minnesota: Accurate Publishing & Printing, Inc., 1991.

United States Department of the Interior
National Park Service**National Register of Historic Places**
Continuation SheetSection number 9 Page 38

Marion Veterans Administration Hospital Historic District
Name of Property
Williamson County, Illinois
County and State
U.S. Second Generation Veterans Hospital
Name of multiple listing (if applicable)

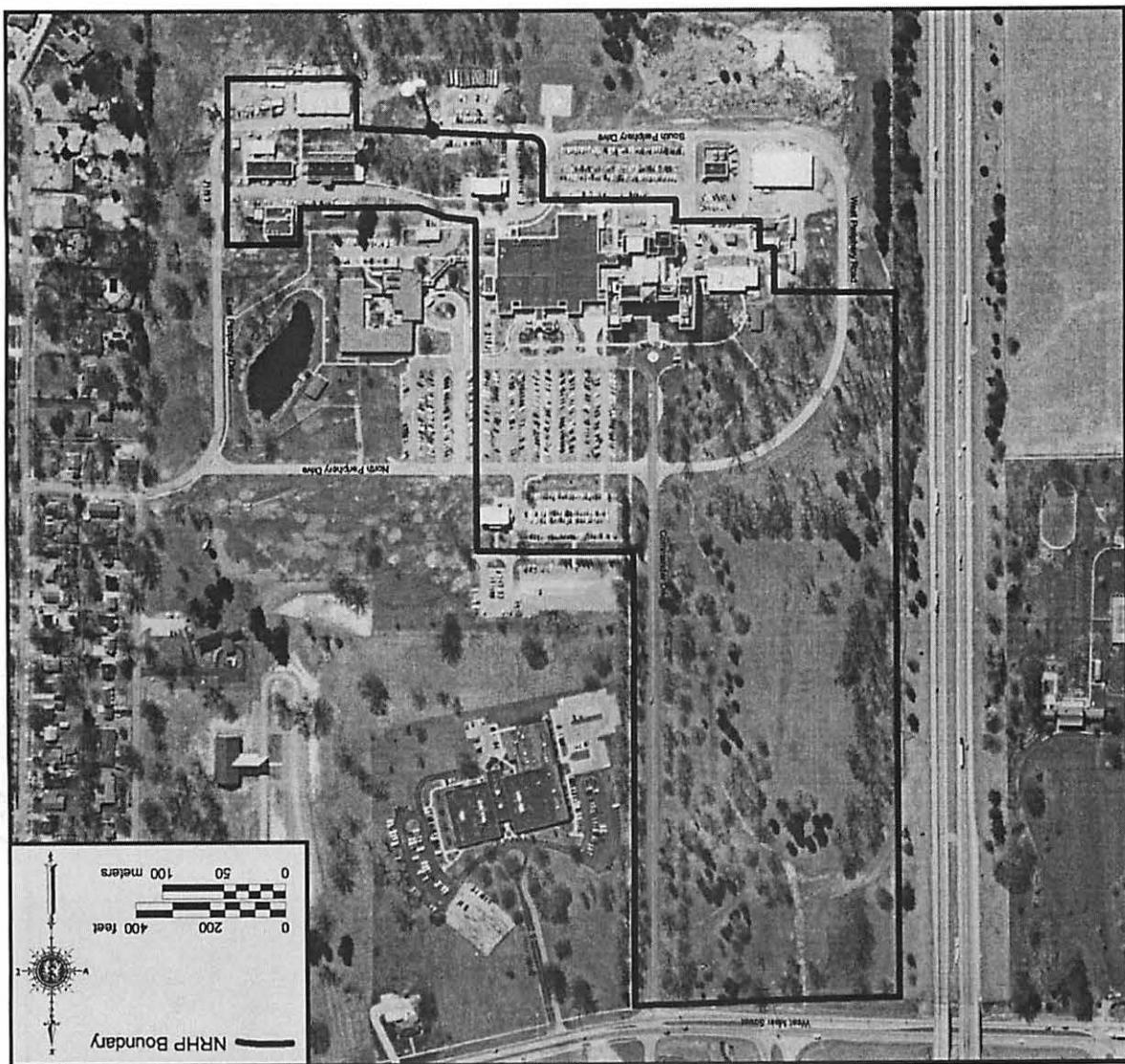
Woodworth, Shannon. "VA Center Looks Forward to \$23 Million Project." *Marion Daily Republican*. n.d.

Woodworth, Shannon. "VA Medical Center is alive and well." *Marion Daily Republican*. December 23, 1992.

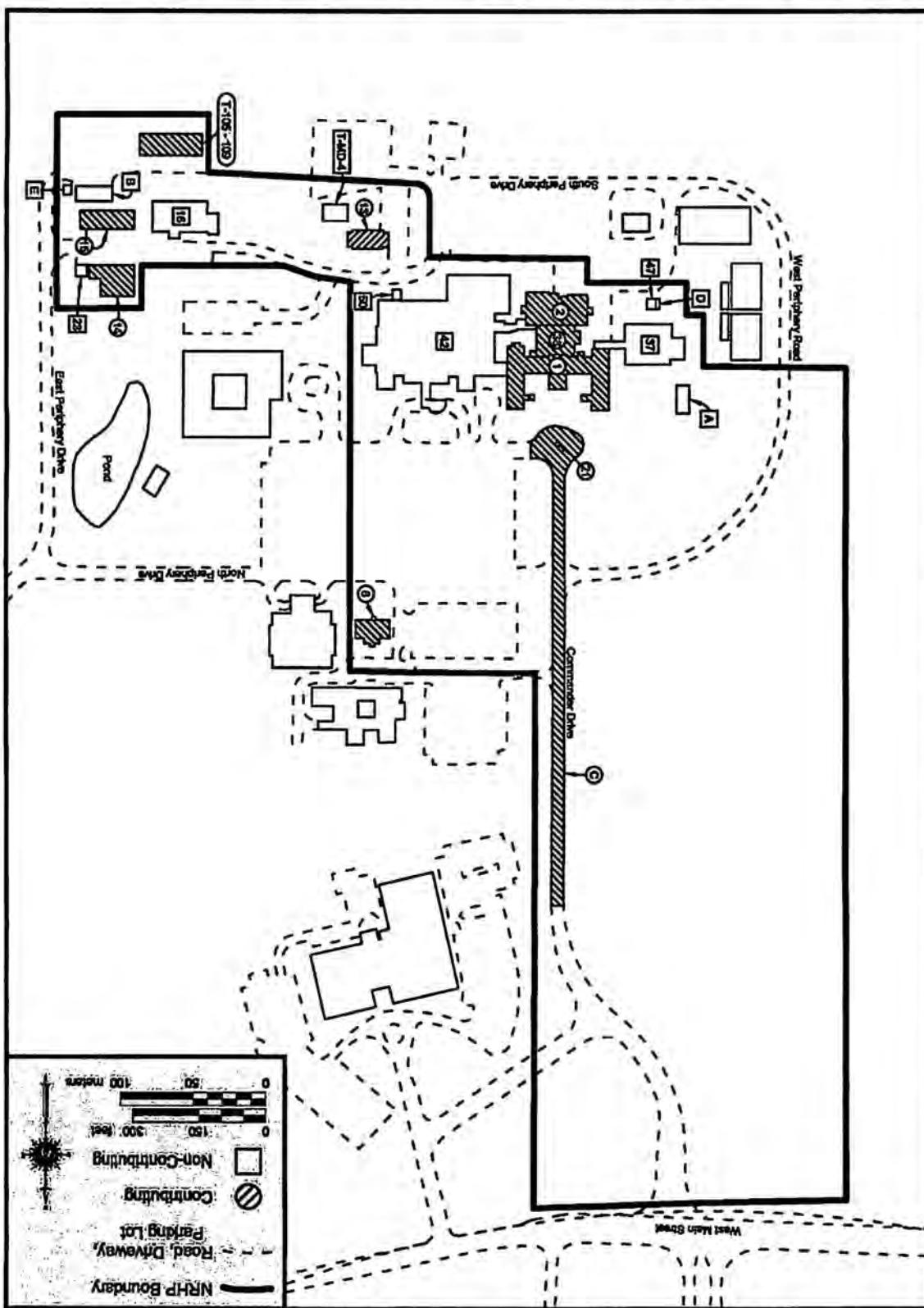


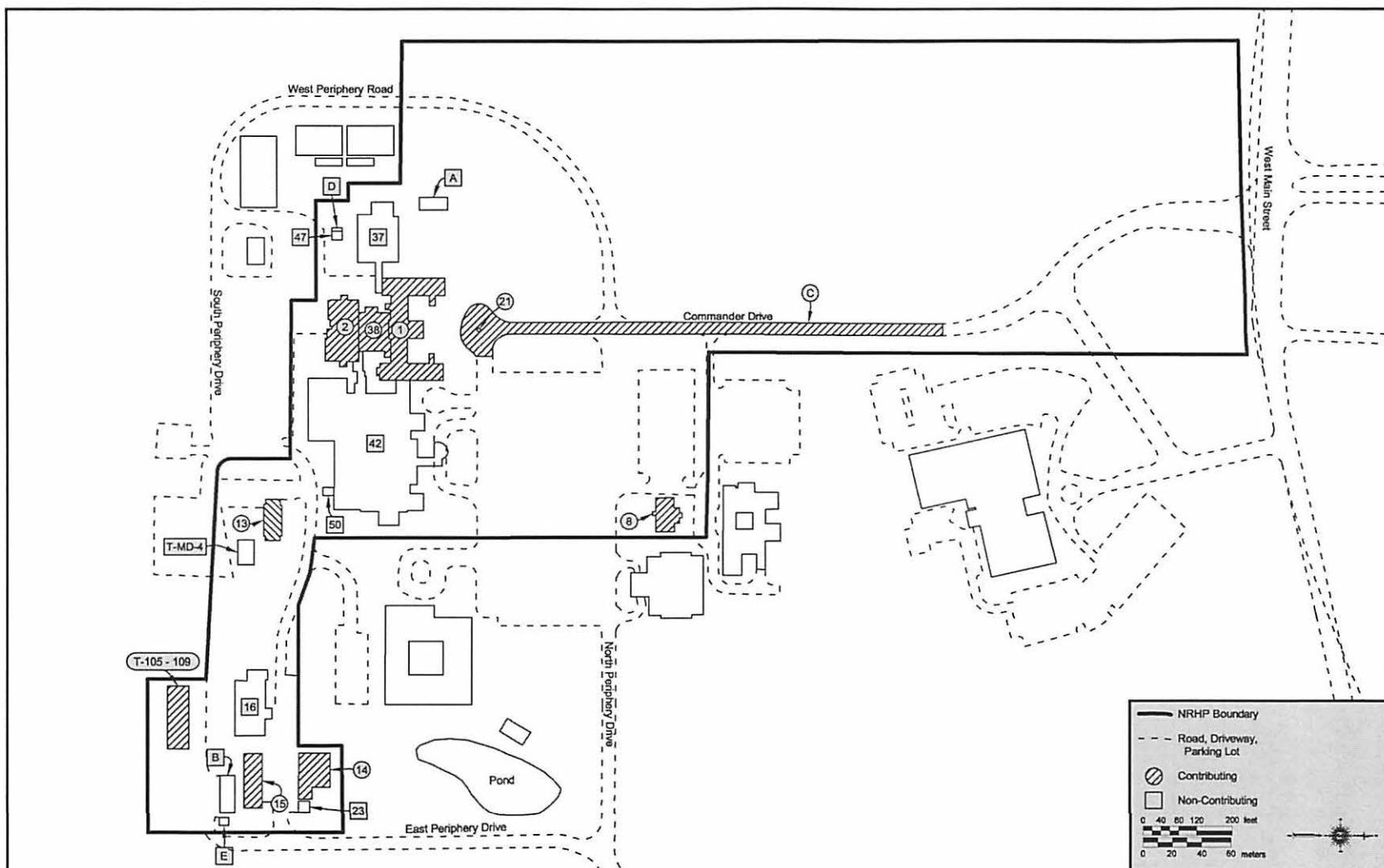
(Figure 1) 1963 (Photo revised 1990) Marion, Illinois, 7.5-minute topographic quadrangle map depicting the National Register boundary.

(Figure 2) National Register boundary indicated on aerial map.



(Figure 3) Sketch map indicating National Register boundary, contributing and noncontributing resources.





(Figure 4) Sketch map indicating National Register boundary, contributing and noncontributing resources (oversize).

United States Department of the Interior
National Park Service

National Register of Historic Places
Continuation Sheet

Section number Photos Page 45

Marion Veterans Administration Hospital Historic District
Name of Property
Williamson County, Illinois
County and State
U.S. Second Generation Veterans Hospital
Name of multiple listing (if applicable)

Photograph Continuation Sheet

Name of Property: Marion Veterans Administration Hospital (same for all photos)

City, County, State: Marion, Williamson County, Illinois (same for all photos)

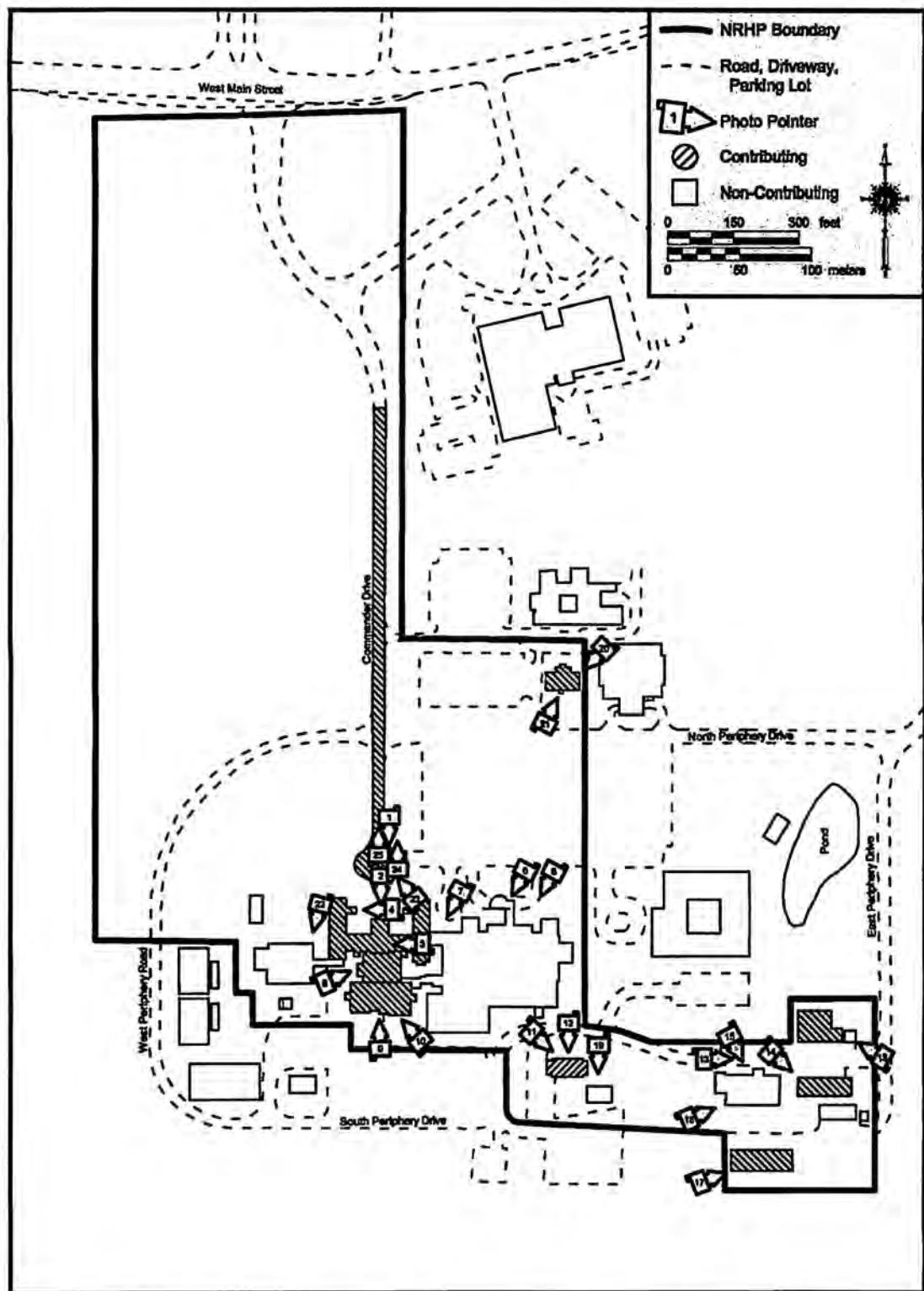
Photographer: Robert C. Whetsell (same for all photos)

Photo date: February 3-4, 2011 (same for all photos)

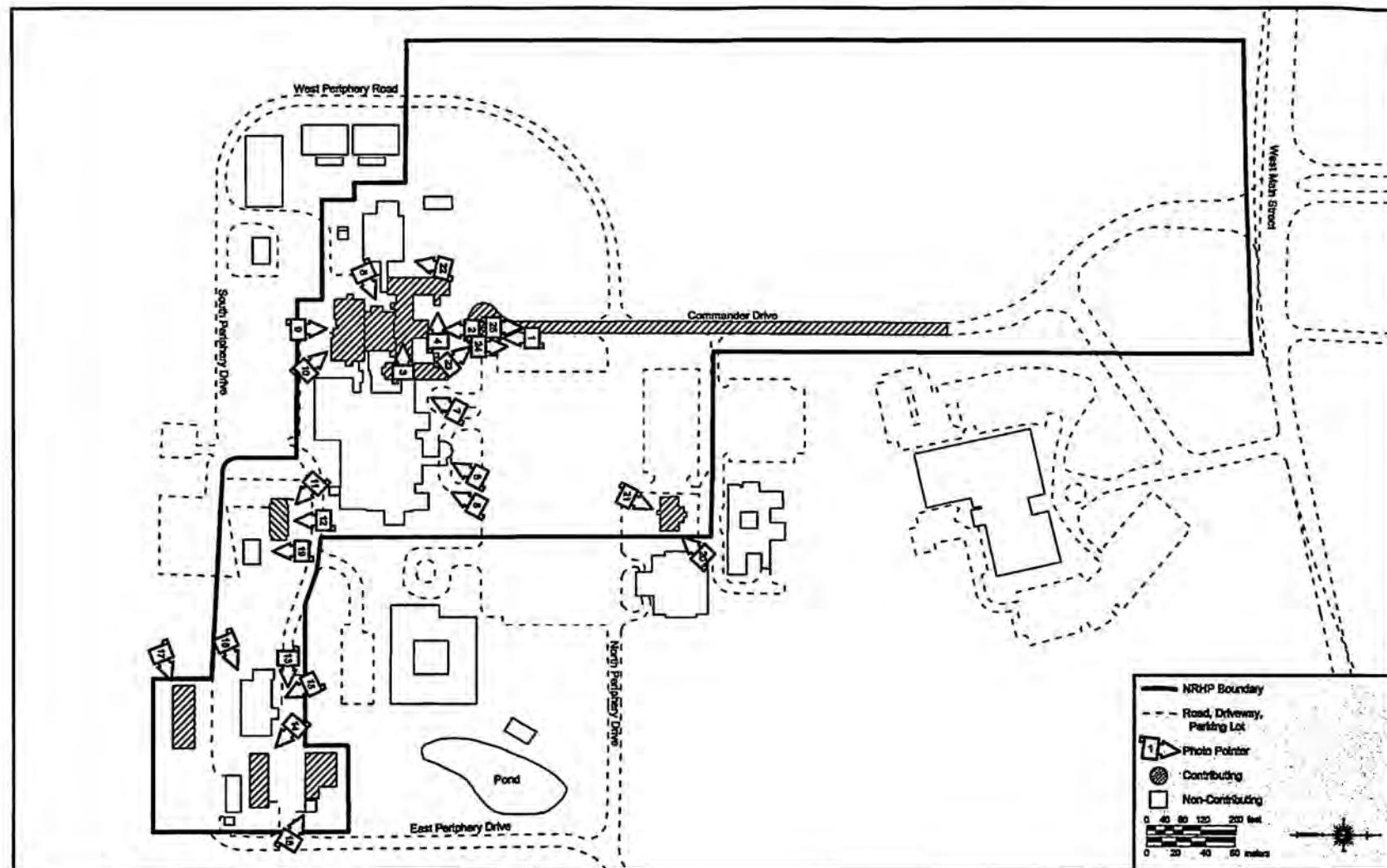
Original Negative: N/A (submitted compact disc, same for all photos)

1. Resource 21 and façade of Resource 1. View to the south.
2. Central façade pavilion of Resource 1. View to the south.
3. Detail of central pavilion tower of Resource 1. View to the west.
4. East elevation of west façade return wing of Resource 1. View to the west.
5. Eastern portion of façade of Resource 42. View to the southwest.
6. Façade (north) elevation of Resource 42. View to the south-southwest.
7. Façade (north) of Resource 42 with connection to the east elevation of Resource 1. View looking south-southwest.
8. West elevation of Resource 38 between Resources 1 and 2. View looking to the east-northeast.
9. South elevation of Resource 2. View looking north.
10. South and east elevations of Resource 2. View looking to the northwest.
11. Façade (north) and west elevations of Resource 13. View looking to the southeast.
12. Central façade (north) projection of Resource 13. View looking south.
13. View to the east to the façade and west elevations of Resources 14 and 15.
14. Façade (north) and west elevations of Resource 15. View to the southeast.
15. Façade (north) elevation of Resource 16. View to the southeast.
16. West and rear (south) elevations of Resource 16. View looking to the northeast.
17. North and west elevations of Resource T-109 through T-105. View looking to the southeast.
18. Façade (south) and east elevations of Resource 23. View looking to the northwest.
19. Façade (north) elevation of Resource TM-D-4. View looking to the south.
20. East and façade (north) elevations of Resource 8. View looking to the southwest.
21. Rear (south) elevation of Resource 8. View looking to the north-northeast.
22. Façade (north) elevation of Resource 37. View looking to the south-southwest.
23. View looking to the northwest to the base of the flag pole (Resource 21).
24. View looking north to Resource 21 and the main entrance drive (Resource C).
25. View looking to the north along the main entrance drive (Resource C).
26. View looking to the east to the east wall of the main building's (Resource 1) lobby.
27. View looking to the east to the east wall of the main building's (Resource 1) lobby, dated May 18, 1942.

From the files of the Public Affairs Office, Marion Veterans Affairs Medical Center, Marion, Illinois.



(Figure 5) Sketch map indicating locations of photographs corresponding to those of the Photograph Continuation Sheet.



(Figure 6) Sketch map indicating locations of photographs corresponding to those of the Photograph Continuation Sheet (oversize).



Historic Illinois Building Survey(HIBS) and Historic Illinois Engineering Record (HIER) Standards and Guidelines

The Illinois State Historic Preservation Office (SHPO) within the Illinois Department of Natural Resources (IDNR) administers the state cultural resources program and is responsible for the Historic Illinois Buildings Survey/Historic Illinois Engineering Record (HIBS/HIER) Program of documentation of historic buildings, sites, structures, and objects located in the State of Illinois. HIBS/HIER documentation includes measured drawings, large-format photographs, and written contextual histories and descriptions. The Abraham Lincoln Presidential Library (ALPL) is the repository for these documents.

This document outlines the SHPO's Documentation Standards the HIBS/HIER Standards. These performance standards define the criteria for projects to be accessioned into the HIBS/HIER Collection located at the ALPL.

Acceptable IL HIBS/HIER documentation often includes:

- Measured Drawings
- Large-Format Photographs
- Detailed Historical Context Development
- Physical Descriptions in a Prescribed Written Outline Format

These standards are intended to be used in conjunction with the accompanying guidelines for historical, architectural and engineering documentation. Other publications listed in the bibliography should be consulted.

These standards will be used:

- In preparation of documentation to fulfill mitigative requirements in accordance with the Illinois State Agency Historic Resources Preservation Act [20 ILCS 3420/1 et seq] and Section 106 of the National Historic Preservation Act of 1966, as amended.
- In preparation of voluntary documentation to be submitted for inclusion in the HIBS/HIER Collection.

HIBS/HIER Documentation Standards

The IL HIBS/HIER Documentation Standards address the development of documentation for historic buildings, sites, structures, and objects. HIBS/HIER documentation provides relevant graphic and written information on a property's significance for use by scholars, researchers, preservationists, architects, engineers, and others interested in preserving and understanding historic properties. HIBS/HIER documentation is important for several reasons. It provides for accurate repair or reconstruction of parts of a property, records existing conditions for easements and preserves information about a property that is to be demolished or altered.

Standard 1: Documentation shall adequately explicate and illustrate that which is significant or valuable about the historic building, site, structure, or object.

The historic significance of the building, site, structure, or object identified in the evaluation process should be conveyed by the drawings, photographs, and written materials that comprise the documentation. The historical, architectural, engineering, or cultural values of the subject property, in conjunction with the purpose of the documentation, will determine the level and methods of documentation.

Standard 2: Documentation shall be prepared accurately from reliable sources with limitations clearly stated to permit independent verification of the information.

The purpose of documentation is to preserve an accurate record of historic properties that can be used in research and other preservation activities. To serve these purposes, the documentation must include information that permits assessment of its reliability.

Standard 3: Documentation shall be prepared on and submitted in materials that are readily reproducible, durable, and in standard sizes.

The size and quality of documentation materials are important factors in the preservation of information for future use. Selection of materials is based on the length of time expected for storage, the anticipated frequency of use, and a size convenient for storage and document management.

Standard 4: Documentation will be clearly and concisely produced.

In order for documentation to be useful for future research, written materials must be fully developed, legible and understandable. Graphic materials must contain scale information and location references.

HIBS/HIER Documentation Guidelines

The HIBS/HIER Documentation Guidelines supply more specific guidance and technical information for HIBS/HIER Documentation Standards. They describe the general approach for meeting the Standards. Agencies, organizations, and individuals proposing to undertake the production of HIBS/HIER documentation in a different manner will need to review and gain approval of their strategy with the HIBS/ HIER Coordinator prior to the execution of a contract for or the initiation of production of HIBS/HIER documentation.

The following definitions are used in conjunction with these guidelines:

- **Documentation** – Measured drawings, photographs, contextual histories, physical descriptions, inventory cards, or other media that provide graphic and written information on historic buildings, sites, structures, or objects.
- **Field Photography** – Photography other than large-format negatives, intended for the purpose of producing documentation, usually 35 mm.
- **Field Records** – Notes of measurements taken, field photographs, and other recorded information intended for the purpose of producing documentation.
- **Large-Format Photographs** – Photographs made from 4" x 5" negatives. Appropriate techniques are to be implemented to correct perspective distortion.
- **Measured Drawings** – Drawings produced on HIBS/HIER acceptable materials depicting historic or existing conditions and other relevant features of the subject. Measured drawings are produced in ink on archivally stable mylar.
- **Photocopy** – A photograph, with large-format negative, of a photograph or drawing.
- **Select Existing Drawings** – Drawings of original construction or later alterations that portray or depict the subject's historic value or significance.
- **Sketch Plan** – A floor plan, generally not to exact scale although often drawn from measurements, where the features are shown in proper relation and proportion to each other.

Goal of Documentation

The goal of the HIBS/HIER Collection is to provide historians, architects, engineers, scholars, and interested members of the public with comprehensive documentation of buildings, sites, structures, and objects significant in Illinois' history. HIBS/HIER documentation often consists of measured drawings, photographs, and written data that provide a detailed record of a property's significance. Measured drawings and properly executed photographs act as a form of insurance against fires and natural disasters by permitting the repair and, if necessary, reconstruction of historic structures damaged by such disasters. HIBS/HIER documentation is sometimes used to provide the basis for enforcing preservation easements. In addition, HIBS/HIER documentation is often the last means of preservation when a historic property is to be demolished or permanently altered. HIBS/HIER documentation provides future researchers access to valuable information that would otherwise be lost.

HIBS/HIER documentation is developed as a result of two separate catalysts. First, the SHPO, pursuant to the Illinois State Agency Historic Resources Preservation Act (20 ILCS 3420/1 et seq) and/or Section 106 of the National Historic Preservation Act of 1966, as amended, requires recordation of historic properties proposed for demolition or substantial alteration as a result of adverse undertakings conducted on those properties (referred to as mitigation projects). Secondly, individuals and organizations, on their own initiative, can prepare documentation according to HIBS/HIER Standards and donate that documentation to the HIBS/HIER Collection. Required documentation levels will vary.

HIBS/HIER Standards describe the fundamental principles of the development of HIBS/HIER documentation. The HIBS/HIER Guidelines listed under each of the following HIBS/HIER Standards provide basic information about developing documentation for the HIBS/HIER Collection. The HIBS/HIER Guidelines are augmented by more specific graphic and written documentation requirements which are included here as supplemental information. Additional specific information concerning the production of HIBS/HIER documentation is included in a separate document entitled HIBS/HIER Program/Technical Commentary, which can be made available upon request.

Documentation prepared for the purpose of inclusion in the HIBS/HIER Collection must meet the requirements listed below. The SHPO HIBS/HIER Coordinator retains the right to refuse documentation for inclusion in the HIBS/HIER Collection when that documentation does not meet HIBS/HIER requirements specified in this document.

Standard I: Content – HIBS/HIER documentation shall adequately explicate and illustrate what is significant or valuable about the historic building, site, structure, or object being documented.

Guidelines

Documentation shall meet one of the following levels to be considered adequate for inclusion in the HIBS/HIER Collection, unless another agreed-upon method for recordation is approved by the HIBS/HIER Coordinator.

1. Documentation Level I

- a. Drawings: a full set of measured drawings depicting existing or historic conditions.
- b. Photographs
 - i. large-format (4" x 5") negatives and 5" x 7" prints of exterior and interior views
 - ii. photocopies with large format (4" x 5") negatives of select existing drawings, site plans or historic views
- c. Written Data
 - i. contextual history(ies)
 - ii. architectural/site description

2. Documentation Level II

- a. Drawings: original drawings photographically reproduced on archivally stable HIBS/HIER mylar.
- b. Photographs
 - i. large-format (4" x 5") negatives and 5" x 7" prints of exterior and interior views
 - ii. historic views
- c. Written Data
 - i. contextual history(ies)
 - ii. architectural/site description

3. Documentation Level III

- a. Drawings: sketched floor plan
- b. Photographs: large-format (4" x 5") negatives and 5" x 7" prints of exterior and interior views
- c. Written Data
 - i. contextual history(ies)
 - ii. architectural/site description

The HIBS/HIER Program retains the right to refuse any documentation of buildings, sites, structures or objects lacking historical significance. Buildings, site, structures, or objects must be listed on or eligible for listing on the National Register of Historic Places to be considered for inclusion in the HIBS/HIER Collection.

The type and amount of documentation should be appropriate to the nature and significance of the properties being documented. Similarly, the aspect of the property that is being documented should reflect the nature and significance of the property.

Standard 2: Quality - HIBS/HIER documentation shall be prepared accurately from reliable sources with limitations clearly stated to permit independent verification of information.

Guidelines

For all levels of documentation, the following quality requirements shall be met:

1. **Measured Drawings** shall be produced from recorded, accurate measurements. Portions of buildings or structures that are not accessible for measurement should not be drawn on the measured drawing but clearly labeled as not accessible or drawn from available construction drawings or other sources, and so identified. No part of the measured drawings shall be produced from hypothesis or non-measurement related activities. Documentation Level I measured drawings shall be accompanied by a set of field notebooks in which measurements were first recorded. Other drawings prepared for Documentation Levels II and III, shall include a statement describing where the original drawings are located.
2. **Large-Format Photographs** shall clearly depict the appearance of the property and areas of significance of the recorded building, structure, site, or object. Each view shall be perspective corrected and fully captioned.
3. **Written Contextual History(ies) and Physical Descriptions** for documentation Levels I and II shall be based on primary sources to the greatest extent possible. For Level III, secondary sources may provide adequate information; if not, primary research will be necessary. An assessment of the reliability and limitations of sources shall be included. Within the written contextual history(ies), statements shall be footnoted, or end noted as to their sources, where appropriate. The written data shall include a methodology section specifying research strategy, names of research staff, dates of research, sources searched, limitations of the project and a project information statement.

The reliability of the HIBS/HIER Collection is dependent upon high-quality documentation. Quality is not easily prescribed or quantified, but it derives from a process in which thoroughness and accuracy play a large part. The principle of independent verification of HIBS/HIER documentation is critical to the HIBS/HIER Collection.

Standard 3: Materials HIBS/HIER documentation shall be prepared on materials that are readily reproducible for ease of access, durable for long storage, and in standard sizes for ease of handling.

Guidelines

For all levels of documentation, the following material requirements shall be met:

1. **Measured Drawings** – Ink on translucent, archivally stable materials in standard size of 24" x 36".
2. **Large-Format Photographs** – Black and white film only, printed on archival paper, mounted on properly labeled archival board; 4" x 5" negatives will accompany prints; print size will be 5" x 7".

3. **Written History(ies) and Physical Description** – Text contained within the HIBS/HIER Written Outline Format; submitted on 8.5" x 11" archival bond paper.
4. **Field Records** – Field notebooks and field photography; photo identification sheet will accompany 35 mm negatives and contact sheet; no archival requirements; submitted field records must fit into 9.5" x 12" folding file.
5. **95% Submittals** – 95% review documentation shall be emailed to the SHPO HIBS/HIER Program Coordinator/Cultural Resources Coordinator.
6. **100% Submittals** - All 100% IL HIBS/HIER documentation accepted by the IL HIBS/HIER Program Coordinator must be submitted in the standard, archival formats in an archival clamshell.
7. **All IL HIBS/HIER Documentation is intended for reproduction.** Although field records are not intended for quality reproduction, it is specified that they be used to supplement the formal documentation. Field records are not required to meet the archival standard but are maintained as a courtesy to the collection user.
8. The basic durability standard for IL HIBS/HIER Documentation is **500 years**.

Standard 4: Presentation - IL HIBS/HIER documentation shall be clearly and concisely produced.

Guidelines

For all levels of documentation, the following requirements for presentation will be met.

1. **Measured Drawings** - Level I measured drawings will be lettered mechanically (i.e., Leroy or similar) or in a hand-printed equivalent style. Adequate dimensions shall be included on all sheets. Levels I and II title sheet(s) shall include state, local, and site maps; property significance statement; project information statement; and drawings index listing. Level III sketch plans shall be neat and orderly.
2. **Large-Format Photographs** - 5x7", black and white, fiber paper prints will be mounted on archival card stock and labeled in the appropriate manner.
3. **Written History(ies) and Physical Description** - Data shall be typewritten on 8.5' x 11" archival, bond paper using the required IL HIBS/HIER outline format and follow accepted rules of grammar and notation.
4. **Sources of Technical Information** for IL HIBS/HIER Documentation
 - a) Burns, John A. Recording Historic Structures. Washington, D.C.: The AIA Press, 1989.
 - b) Turabian, Kate L. A Manual for Writers of Term Papers, Theses, and Dissertations. Chicago: University of Chicago Press, 1987.
 - c) A Manual of Style. Chicago: University of Chicago Press, 1980.
 - d) HABS Field Instructions for Measured Drawings. Washington, D.C.: HABS/HAER, National Park Service, 1981.
 - e) HABS Historical Reports. Washington, D. C.: HABS/HAER, National Park Service, 1995. (Draft)
 - f) HABS Historian's Procedures Manual. Washington, D.C.: HABS/HAER, National Park Service, 1983.
 - g) HAER Field Instructions. Washington, D.C.: HABS/HAER, National Park Service, 1981.
 - h) HABS/HAER Program IHPA Program/Technical Commentary. Springfield, IL: IL HIBS/HIER, Illinois Historic Preservation Agency, 1999.
 - i) Manual for Preparing Historic American Buildings Survey/Historic American Engineering Record Documents. Omaha, NE: Great Plains Systems Office, National Park Service, 1996. (Draft)
 - j) Photographic Specifications for the Historic American Buildings Survey and the Historic American Engineering Record. Omaha, NE: Great Plains Systems Office, National Park Service, 1996.
 - k) Transmitting Documentation to HABS/HAER WASO. Washington, D.C.: HABS/HAER, National Park Service, 1995. (Draft)

Effective Date: 1-21-1999

Revised 10-27-2022



Attachment 2

Illinois Department of Natural Resources

One Natural Resources Way Springfield, Illinois 62702-1271
www.dnr.illinois.gov

JB Pritzker, Governor

Colleen Callahan, Director

Historic Illinois Building Survey (HIBS) and Historic Illinois Engineering Record (HIER) Program Administrative Policies

1. The Historic Illinois Building Survey/Historic Illinois Engineering Record (HIBS/HIER) Coordinator/Cultural Resources Coordinator within the State Historic Preservation Office (SHPO) in the Illinois Department of Natural Resources (IDNR) administers the HIBS/HIER Program.
2. HIBS/HIER documentation can be generated as result of state and federal statutory compliance requirements, local government/commission mandates, or through voluntary contribution.
3. HIBS/HIER documentation requirements are established through the HIBS/HIER Standards and Guidelines. For general technical assistance, contact the HIBS/HIER Coordinator.
4. All HIBS/HIER documentation accepted for inclusion in the HIBS/HIER Collection must meet the HIBS/HIER Standards and Guidelines, HIBS/HIER technical requirements, and specific scopes of work, as established by the HIBS/HIER Program Coordinator/Cultural Resources Coordinator.
5. No movement, demolition, alteration or other form of modification will be authorized on properties that are part of historic-preservation statute mitigation until fieldwork HIBS/HIER documentation is received, reviewed, and accepted in writing by the HIBS/HIER Program Coordinator/Cultural Resources Coordinator.
6. A list of HIBS/HIER consultants/contractors will be maintained and updated as needed by the SHPO for public use. Firms, organizations, and/or individuals on the list must have successfully completed at least one HIBS/HIER documentation project and have expressed a desire to be considered for HIBS/HIER work. This list is not to be considered an endorsement by SHPO or IDNR. Consultants/ Contractors can be deleted from this list at their own request or through SHPO initiative, due to consultant/contractor failure to meet HIBS/HIER Standards and Guidelines or SHPO-generated scopes of work.
7. Specific HIBS/HIER documentation scopes of work are not formally established until the subject scopes are issued in writing by the SHPO and acknowledged in writing by lead agencies participating in regulatory project mitigation or entities generating HIBS/HIER documentation through self-initiative. It is strongly recommended that HIBS/HIER consultants/contractors not bid on HIBS/HIER documentation projects until the SHPO, and the concerned parties agree to scopes of work in writing.
8. HIBS/HIER consultants/contractors shall consult with the SHPO HIBS/HIER Coordinator/Cultural Resources Coordinator prior to commencing work to confirm the scope of work and specific historic contextual requirements.
9. HIBS/HIER consultants/contractors, or their clients, will submit to the SHPO a 95% digital HIBS/HIER draft for review and comment prior to producing and submitting 100% HIBS/HIER documentation for review and acceptance.

10. The HIBS/HIER Program requires submittal of one archival set of 100% HIBS/HIER documentation with color printed images of the subject property, and one digital version of the 100% documentation to be displayed on the SHPO website.
11. SHPO review and comment period for HIBS/HIER documentation is generally thirty (30) working days. The review and comment period begins upon receipt of complete HIBS/HIER documentation at SHPO offices.
12. HIBS/HIER Collection is curated and managed by the Abraham Lincoln Presidential Library (ALPL). HIBS/HIER documentation is available for public use. The 100% archival set of HIBS/HIER documentation is available for use, provided the HIBS/HIER Coordinator or the ALPL Chief of Acquisitions authorizes such use.

Effective 1-21-1999

Revised 10-27-2022

Attachment 3

Historic Illinois Building Survey (HIBS) and
Historic Illinois Engineering Record (HIER) Written
Outline Format

HISTORIC ILLINOIS BUILDING SURVEY
NAME OF BUILDING (SECONDARY NAME)

Location:

Present Owner: This heading may be combined to Present Owner and Occupant if they are one and the same. Include address of owner if it is different from address of structure.

Present Use:

Significance:

PART I. HISTORICAL INFORMATION

(Double space between outline headings -- single space text. Omit any heading or part of a heading that is not appropriate, and re-number other outline headings as needed.)

A. Physical History

1. Date(s) of construction:
2. Architect:
3. Original and subsequent owners:
4. Builder, contractor, suppliers:
5. Original plans and construction:
6. Alterations and additions:

B. Historical Context:

PART II. ARCHITECTURAL INFORMATION

A. General Statement:

B. Description of Exterior:

1. Over-all dimensions:
2. Foundations:
3. Walls:
4. Structural system, framing:
5. Porches, stoops, balconies, bulkheads:
6. Chimneys:
7. Openings:
 - a. Doorways and doors:
 - b. Windows and shutters:
8. Roof:
 - a. Shape, covering:
 - b. Cornice, eaves:
 - c. Dormers, cupolas, towers:

C. Description of Interior:

1. Floor plans:
 - a. Describe by floors
 - b. Etc.
2. Stairways:
3. Flooring:

4. Wall and ceiling finish:
5. Openings:
 - a. Doorways and doors:
 - b. Windows:
6. Decorative features and trim:
7. Hardware:
8. Mechanical equipment:
 - a. Heating, air conditioning, ventilation:
 - b. Lighting:
 - c. Plumbing:
 - d. Etc.

D. Site:

1. General setting and orientation:
2. Historic landscape design:
3. Outbuildings:

PART III. SOURCES OF INFORMATION

- A. Original Architectural Drawings:
- B. Early Views:
- C. Interviews:
- D. Bibliography:
 1. Primary and unpublished sources: 2.
 - Secondary and published sources:
- E. Likely Sources Not Yet Investigated:
- F. Supplemental Material:

PART IV. METHODOLOGY OF RESEARCH

- A. Research Strategy:
- B. Actual Research Process:
- C. Archives and Repositories Used:
- D. Research Staff:
 1. Primary Preparer: Name, Title, Organization
 2. Photographer: Name, Title, Organization
 3. Delineator: Name, Title, Organization
 4. Additional Staff: Name, Title, Organization

PART V. PROJECT INFORMATION

NOTE: The project information statement will be provided by the SHPO Cultural Resources Manager handling the mitigation proceedings. This statement will cite the state or federal statute the general project is being reviewed under and the applicable Memorandum of Agreement requiring HIBS recordation.

For HIBS/HIER projects submitted without statutory involvement, a short statement identifying why the project was undertaken will be appropriate.

The project information statement will be duplicated on the title sheet of HIBS/HIER Level I and II mylars under the heading of "Project Information Statement."