

U.S. VETERANS BUREAU HOSPITAL No. 100
5500 Armstrong Road
Battle Creek
Calhoun County
Michigan

HABS No. MI-392

HABS
MICH
13-BATER,
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PHOTOGRAPHS

WRITTEN HISTORICAL AND DESCRIPTIVE DATA

HISTORIC AMERICAN BUILDINGS SURVEY
National Park Service
Northeast Region
U.S. Custom House
200 Chestnut Street
Philadelphia, PA 19106

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HISTORIC AMERICAN BUILDINGS SURVEY

HABS No. MI-392

U. S. VETERANS BUREAU HOSPITAL No. 100

LOCATION: 5500 Armstrong Road
Battle Creek, Calhoun County, Michigan
USGS Augusta, Michigan Quadrangle
Universal Transverse Mercator Coordinates
16.640400.4689500

PRESENT OWNER: United States
Department of Veteran Affairs
810 Vermont Avenue, N.W.
Washington, DC

PRESENT USE: Psychiatric Medical Center for American Veterans

STATEMENT OF SIGNIFICANCE: United States Veterans Bureau Hospital No. 100 officially opened on October 15, 1924. Situated on a campus setting near the Kalamazoo River, the Center was built on a 675 acre site once occupied by a portion of Camp Custer, a military induction center that completely closed following the Korean War.

The United States War Department, with Thomas E. Leaky, the supervising engineer, opened bids from various construction companies on February 21, 1923 in Washington DC. A. Bently and Son, a construction company based in Toledo, Ohio, was awarded the construction contract, having submitted a low bid of \$2,174,680. The hospital was to be completed within 500 days; calling for the construction of twenty-three buildings, providing accommodations to handle 500 patients.

Constructed as part of the Veterans Bureau's "Architectural Set" for hospitals, Battle Creek Veterans Bureau Hospital No. 100 represented the United States government's traditional use of "standard" designs. Since the nineteenth century the U.S. government adopted standard designs for its many military facilities and variations among these structures were few. However, Veterans hospitals built across the country from 1923 to the 1940's, redefined the government's standard design theories. Variations on military building designs in the past often reflected necessary adaptation to available construction materials and site topography. While veterans hospitals also sought the need to adapt to available resources and geography, their construction variations began to reflect reforms in medical care, thus resulting in more creative design policies.

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Georgian Colonial in its architectural style, Battle Creek's Veterans Bureau Hospital, No. 100, resembled other Veterans Bureau's medical centers in its construction, functional layout, elevation, plan and design approach. But architectural styles were modified at other centers to accommodate the surrounding communities. In conjunction with advancements in medical treatment, veterans hospitals throughout the country displayed some sensitivity to local history in an effort to provide a "home-like" atmosphere for patients.

In addition, Battle Creek's Veterans Bureau Hospital No. 100, was the first completely electrified hospital in the United States. Central Electric Co. of Battle Creek was awarded the contract for the electrical work, which included all the buildings, a complete street lighting plan, and a fire alarm system similar to the one being used at the time by the City of Battle Creek. The construction of the first complete electrified hospital of its kind was significant to the Battle Creek community and the country.

PART 1 - HISTORY OF UNITED STATES VETERANS BUREAU HOSPITAL No. 100

Established by Executive Order in 1921, the Veterans Bureau originated from a need to standardize the medical treatment and facilities American servicemen required. World War I veterans were already receiving medical care through a variety of governmental and military services, when the Veterans Bureau began to seek ways to uniform those services throughout the country.

Charles Forbes, formerly the Director of the War Risk Insurance Bureau, was appointed by President Warren Harding as the Veterans Bureau's first director. Under Forbes' administration a massive construction program, incorporating the governments standard prototype designs for new hospitals, was initiated. As one of the first ten facilities to be built under this new program, construction for Battle Creek's Veterans Hospital No. 100 began in 1923 (Rutter).

When Charles Forbes toured existing centers of veterans medical treatment, he considered them "deplorable" and their conditions "hazardous". The problem Forbes witnessed was the classification of Veterans Bureau's patients - general medical, neuro-psychiatric and tuberculosis patients were currently housed together. Through the use of prototype design, a new hospital construction program Forbes initiated, aided in establishing categories of patients Forbes felt should be segregated. By creating campus settings for the construction of several medical buildings, veterans patients could be assigned to wards designated for their illnesses and proper treatments (Mollenhoff and Tupek).

There may be several reasons why the government chose Battle Creek, Michigan, as the location for one of the new hospitals. Already the site of Camp Custer, several newspaper accounts attest to the city's ability to receive important governmental support. The history of Battle Creek's involvement with the United States government began with the city's Chamber of Commerce. At the start of World War I, Battle Creek's 700 member Chamber of Commerce petitioned the federal government in hopes of establishing a military camp (Camp Custer) in their vicinity. The Chamber continued their negotiations with the War Department, as the Department's interest in their request increased. This endeavor was viewed as "Battle Creek's patriotic duty" - one that ultimately aided in founding a second generation facility (The Battle Creek Moon-Journal, 16 Oct. 1924).

The Bureau's selection of hospital sites were contingent on a variety of factors:

1. Demographics: The government requested an investigation into the numbers of veterans in need of medical care, nationwide, and the type of care required, compared to the number of available hospital beds.

2. Availability of federal lands: the government examined potential sites that either occupied previous federal military posts, or were the result of transfers of existing federal lands or facilities between agencies. Battle Creek's location, for example, already rested on an abandoned military fort, therefore reducing extensive economic impacts on the local community.
3. Type of facility: the government wished to determine whether general medical and surgical hospitals, or neuro-psychiatric and tuberculosis hospitals were in demand. The government's general policy at the time designated major urban areas as sites for general medical and surgical centers, while more rural areas were chosen for the location of neuro-psychiatric and TB hospitals.
4. Local initiative: The government's interest in the local civic and governmental support given to requests for veterans hospitals, was an important consideration in site selection.
5. Political sensitivity: On occasion the Bureau could select a site specifically connected to home districts of important political leaders (Mollenhoff and Tupek).

With the passage of the First Langley Bill, the construction of veterans hospitals under the Treasury Department was approved. At this time the "construction of all federal buildings fell under the jurisdiction of the Supervising Architect in the Department of the Treasury" (Mollenhoff and Tupek). Enacted after the establishment of the Veterans Bureau, the Second Langley Bill gave the Bureau direct authority to construct veterans hospitals (Mollenhoff and Tupek).

Congratulated by the United States government, "as the only camp city in all the lists to turn back a balance when camp property had been secured and roads built," the U.S. government assured Battle Creek "that in no other camp city had affairs been handled so effectively" (The Battle Creek Moon-Journal, 16 Oct. 1924). Encouraged by their reputation as a sound military base, Battle Creek's Chamber of Commerce suggested using a portion of the Camp Custer site for the construction of a new veteran's hospital. Impressed by their past camp efforts, the United States government selected Battle Creek as the location for Veterans Bureau Hospital No. 100.

With the approval of an \$8,000,000 appropriation from the U.S. Congress, construction of the new hospitals began in 1924. A. Bentley and Son, from Toledo, Ohio, won the Battle Creek site construction bid, while the Veterans Bureau Construction Service proceeded with the hospital designs. Planned with community location, size and topography of individual parcels of land, as well as with the number of structures required to meet the necessary numbers of beds in mind, the original appearance of these hospital sites depicted a campus setting (Hill, 1-4).

The Veterans Bureau "Architectural Set" of hospitals incorporated a theory of uniform or standard designs. Traditionally, U.S. military structures (barracks, mess halls, etc.) were constructed with very little variation in styles or plans. The reason for this originated from the government's need to accommodate large numbers of troops who were concentrated at permanent frontier posts in the nineteenth century (Mollenhoff and Tupek). While some design variations did occur, it was often the result of adaptation - to available building materials and site topography. With the onset of World War I and subsequent reform in medical care, the federal government's use of standard designs transformed.

A component of the Veterans Bureau architecture prototype, the veterans hospitals throughout the country remained similar in construction, plan, and elevation (MHC letter 3 Jan 90). They incorporated design variations, adapting to available resources, site topography, environments, etc. However, the veterans hospital did add another dimension to standard design theories. In conjunction with wide spread medical care reform (illustrated by Forbes), the Veterans Bureau began to reflect more design variations than previously seen (Mollenhoff and Tupek).

Because Charles Forbes initiated the need to construct separate facilities, to categorize patients, the government took another step varying hospital designs not only for resource and topographic adaptation, but to community location, atmosphere, citizenry and history. Reform in medical health care, both for general medical and neuro-psychiatric patients, stressed the need to make patients comfortable by providing them a "homey" and as natural an environment as possible.

The 16 October 1924 edition of The Battle Creek Enquirer and THE EVENING NEWS, an article entitled "War Vets to be Made to Feel at Home, Plea", gave witness to the government's sensitivity to medical care reform; specifically for the neuro-psychiatric patients treated at Battle Creek's Veterans Bureau Hospital No. 100. Colonel Frank E. Leslie, the first medical officer in charge of the Battle Creek hospital, addressed an audience of approximately 2000 people at the hospital's opening ceremonies, on the subject of psychiatric medical treatment. Colonel Leslie resented listening to people "call this class of patients crazy, ... these cases are simply mentally sick men whose minds cracked under [the] strain of warfare" (TBCMJ 17 Oct. 1924). Suggesting that the day of the "shell shock" victim was nearly over, Colonel Leslie explained that the methods of treating psychiatric patients, as well as means toward cures, "consisted of nothing more than an attempt to get [the ex-soldier] back into normal ways of thinking and acting" (TBCMJ 17 Oct. 1924).

Colonel Leslie requested Battle Creek citizens to allow his unit to "become a part of the community life" (TBCEEN 16 Oct. 1924). He asked that the citizens visit the hospital as often as possible. Stating "I want them [patients] surrounded by the wholesome influences of home" (TBCEEN 16 Oct. 1924). The medical care, treatment and cure of mentally ill patients were

an effort to create normalcy within the confines of the hospital campus. These patients were no longer to be referred to as "crazy;" instead, the recent reform wave stressed the need to cure - to provide patients a comfortable "familiar" atmosphere in which to heal; mingling in society, getting some kind of work he enjoys, and attempting to get back to a regular normal routine of living" (TBCMJ 14 Oct. 1924).

The veterans hospitals were constructed with this medical care/cure ideology in mind. Several structures built to house segregated patients and extensive numbers of personnel and staff, were constructed in a standard campus setting. Medical reform also inspired new design variations. In an effort to incorporate patients into their surroundings, veterans hospitals across the country adopted architectural styles that differed according to their host community. These structural variations were also the result of resource availability, site geography and community location. The range of architectural styles among veterans hospitals found throughout the United States reflected greater sensitivity to local histories and structural design preferences (Mollenhoff and Tupek).

Upon the completion of its construction, Battle Creek's Veterans Bureau Hospital No. 100 was heralded as the first all electrified institution of its kind in the United States, setting a precedent for the design of all future institutional facilities (TBCMJ 14 Oct. 1924). Under the supervision of Battle Creek's Central Electrical Company, the electrical installation was completed fourteen days ahead of schedule - a record time according to a company statement in 1924 (TBCMJ 14 Oct. 1924). The Battle Creek Moon Journal of 14 October 1924 stated that the local company had been "complimented by outside architects for the manner in which they handled the task."

Central Electrical Company's work involved a total installed electrical load of 400 Horse Power or 300,000 watts. Fifteen miles of conduit with forty miles of wire were installed in the buildings, while 18 miles of cable were required to carry the current from the camp's substation to the transformer, located in the rear of the hospital (TBCMJ 14 Oct. 1924).

The electrical work covered three separate jobs: the equipping of all hospital buildings, the creation of a street lighting plan, and the installation of a fire alarm system. Within the hospital buildings, Central Electrical Company placed over 1500 light fixtures, using over 2000 mazda lamps. These lamps provided an illuminating system in hospital wards by placing a bulb behind heavy plate glass and laying them flush with the ceiling; the heavy glass softened the lights glare. By situating the lamps in certain areas of the hospital, they helped to ensure light without disturbing patients as they slept (TBCMJ 14 Oct. 1924).

An important aspect of the hospital's electrical capabilities included cooking and baking. Kitchens, mess halls, treatment buildings, officers' and nurses' quarters all operated with electrical cooking and baking

equipment. Central Electrical Company's list of installed items included: one bake oven, 27,000 watts; three heavy duty ranges, 22,000 watts each; three roasting ovens, 14,000 watts each; two warming tables, 6000 watts each; sixteen ranges, 8000 watts each; and one range in the nurse's quarters with 14000 watts (TBCMJ 14 Oct. 1924).

Another important function the electrical company installed was hospital sterilization. All sterilizer were electrical, setting yet another precedent. A 1924 advertisement, taken by Central Electrical Company, cited other hospitals ordinarily heating their sterilizers with steam (TBCEEN 15 Oct. 1924).

An ornamental street lighting system that operated thirty five outdoor pedestal and bracket lights, was the second project. Similar to those used on Battle Creek's Washington Avenue, the lights operated in a series, with a 2300 volt circuit. Two and one-half miles of overhead wires and one mile of underground cables were installed (TBCMJ 14 Oct. 1924).

A Gamewell fire alarm system was Central Electrical Company's third installation project. Resembling the system used in Battle Creek's Fire Department at the time, this system required one and one-half miles of underground cable and two miles of overhead cable. The alarm system also included a motor, generator set, storage batteries, punch registers, and indicator gongs (TBCMJ 14 Oct. 1924).

Once located at 21 Jefferson Avenue, N. in Battle Creek, the Central Electrical Company supervised a tremendous project. Complimented with the way they handled and achieved the undertaking, the company was proud to state "no job too large, no job too small" in a half page newspaper advertisement about the hospital project (TBCEEN 15 Oct. 1924).

PART 2 - DESCRIPTION OF THE UNITED STATES VETERANS BUREAU HOSPITAL No. 100

The original site plan for the Veterans Bureau Hospital No. 100 arranged buildings in a circular pattern, radiating from the Kalamazoo River (Mollenhoff and Tupek). During the 1920's, a prototype set of designs were adapted for the construction of all veterans hospitals. While these hospitals across the country remained similar in construction, functional layout, plan, elevation and approach to medical care design, architectural styles differed - an effort to accommodate the surrounding communities (Mollenhoff and Tupek).

Designed in a Georgian Colonial Style, adapted from the Colonial Revival period of architecture, the buildings on the Battle Creek site are two and three stories high, and were designed to conform to a simple massed or H-plan. Construction characteristics include "common bond brick coursing, asphalt tile hipped roofs and pavilions that end in pediments with round or half round windows" (Mollenhoff and Tupek). Common design details include

"brick quoins, terra cotta belt course, classical eave and cornice treatment and rusticated brick base walls" (Mollenhoff and Tupek). A few buildings were constructed with "double story arch openings containing louvered windows or glass entries. The windows are primarily one over one and multi-lighted double-hung sash with brick voussoirs and terra cotta keystones and sills" (Mollenhoff and Tupek).

The following is a list of the original buildings that were located on the Battle Creek Site. Their "historic names" are given, as well as their modern assigned building numbers:

1923/1924

| | |
|---|---------------------|
| (a) Clinical Building | No. 2 |
| (b) Tuberculosis and New Psychiatric Hospital | No. 3 |
| (c) Parole Building | No. 4 |
| (d) Main Kitchen and Dining Room | No. 5 |
| (Note: On the Nomination Form this Building was identified as being constructed in 1937. It is our opinion, based on Barbara Hill's <u>The Quiet Campaign</u> , it was constructed in 1924. | |
| (e) Recreation Building | No. 6 |
| (f) Ward (Continual Treatment Building) | Nos. 8,9,10,11,12 |
| (g) Duplex Quarters | Nos. 16,17,18,19,20 |
| (h) Director's Quarters | No. 21 |
| (i) Nurses Home (Nursing Home Care Unit) | No. 22 |
| (j) Bachelors Quarters (Officer Building) | No. 24 |
| (k) Wood Shop (Fire Station and Carpenter Shop) | No. 25 |
| (l) Station Garage and Shop | No. 26 |
| (m) Laundry Building | No. 27 |
| (n) Warehouse | No. 28 |
| (o) Boiler House | No. 30 |
| (p) Switch House | No. 31 |

(q) Pump House and Valve Pit No. 69

Based on the nomination form for the National Register, three structures were constructed in 1923 prior to the start of construction on the main center. These included:

(r) Steel Water Tank & Tower No. 32

(s) Flag Staff No. 33

(t) Fifteen Car Garage No. 77

While many of these buildings underwent extensive interior remodeling and renovations over the years, their exteriors have retained their original appearance; with the exception of those buildings that were added to and/or were reconstructed as noted below.

According to Barbara Hill's The Quiet Campaign, Battle Creek's Veterans Bureau Hospital No. 100 underwent six (6) primary reconstruction phases from 1926-1969.

1926

- (1) A contract for the construction of curbs and gutters around the hospital grounds, amounting to \$11,643, was awarded to Harry B. Gove, a Battle Creek contractor. About a mile and a half of curbs and gutters were built, paralleling the main roads and sidewalks.
- (2) In April, the R. D. Boyes Company was awarded the contract to construct covered walks from Buildings No. 2 and No. 5, to the west entrance to Building No. 3, and connecting all intermediate buildings, at a cost of \$49,000.

1931 - 1932

- (1) In January, construction of a \$240,000 Acute Treatment Building (No. 39) was started. The low bid was submitted by the Henry B. Ryan Company of Chicago, Illinois. Completed in August, it was the largest building at the hospital built to date. It was also the first building to have automatic elevators.
- (2) In the fall, construction of the Administration Building (No.1) began. The site for this building was southwest of the Clinical Building, making this new building the first one seen driving up to the hospital. Construction was completed in early 1932.
- (3) The Recreation Building (No. 6) had a new wing added on the west, which increased capacity to about 750.

- (4) A small employee dining room addition was added on to west side of the Kitchen (No. 5), and refrigeration facilities were also increased at that time.

1938 - 1941

- (1) A Neuro-Psychiatric Infirmary (No. 7) was constructed in 1938.
- (2) On July 28, 1938, a \$548,680 contract for the construction of two more Ward Buildings was awarded to the James I. Barnes Construction Company of Logansport, Indiana. These buildings were the three story Continual Treatment Building (No. 13), the first building since 1924 that did not contain a dining room or kitchen; and a two story Infirmary Building (No. 14).
- (3) Construction of covered walkways connecting these buildings began in 1939. The Miller-Davis Company from Kalamazoo, Michigan was awarded the contract at a price of \$43,600.
- (4) Fort Custer was reactivated in August of 1940 and needed a hospital of their own. In November of 1941, the Infirmary Building (No. 14) was just completed and turned into a hospital for Army trainees.

1946-1948

- (1) The Alcohol, Drug Abuse and Chapel Building (No. 82) was constructed at a cost of \$460,000. This building was located north of Building No. 2.
- (2) Two Infirmary Wards, Buildings No. 83 and No. 84 were completed in 1947. They were located east of Building No. 82 and were the last Ward Buildings to be constructed at this hospital. Each cost \$426,000 to build.
- (3) The Cannery Building (No. 85) was completed in the spring of 1947. This small building was located behind the main dining room. But, with more land being used for buildings and less for farming, the need for this building disappeared. It was never used for its intended purpose and stood vacant for years. Today, this building houses the Compensated Work Therapy Program.
- (4) In 1947, the increase patient load required the main kitchen to be remodeled and an addition was also built to expand the dining room. The cost of this work was \$73,500.
- (5) In March, 1948, construction started on the Greenhouse (No. 127). The Moms of America, Incorporated, donated \$2,843 for the purchase of a shell from the National Greenhouse Company in Pana, Illinois. The foundation, plumbing, etc. were installed by the Engineering Division with patient help.

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- (6) A 9 hole golf course opened in 1949, primarily due to Robert A. Barricklow, the Physical Director at the hospital.
- (7) Quonset huts were erected along Officer's Row and across the street in back of Building Nos. 83 and 84 at a cost of \$21,963. All but one were torn down in 1957, the other was torn down at a later date.
- (8) Two additional quonset huts were constructed in 1948 in front of building No. 82 and served as the Chapel.
- (9) A stone Picnic House was built in the woods in 1948. In the early 1950's, the Blue Star Mothers of Flint, Michigan, had a portable generator installed, making it possible to hold picnics and parties in the evenings. In 1967 this building burned down and was not rebuilt.

1959 - 1963

- (1) In the spring of 1959, a new Exercise-Therapy Building (No. 134) was constructed at a cost of \$671,000, by the Kay-Cee Construction Company of Skokie, Illinois.
- (2) Also in 1959, the boiler plant underwent a complete renovation at a cost of approximately \$530,000.
- (3) In the spring of 1961, the Canteen-Library Building (No. 136) was completed. This air conditioned facility cost \$883,196 and was constructed by the Kay-Cee Construction Company of Skokie, Illinois.
- (4) The G. O. Lewis Construction Company of Battle Creek was awarded a contract in June 1960 to build the Theater Building (No. 138). The building was completed in 1961.
- (5) In 1963 the entrances to the covered walks were enclosed in order to install a heating system. The Kay-Cee Construction Company was awarded the contract for this work. The closing of the entrances to the covered walks changed the entire traffic pattern of the Medical Center.
- (6) A road was constructed in the rear of Buildings No. 8, 9, 10, 11 & 12 in September of 1963 to facilitate deliveries.
- (7) Docks were also built joining the porches at the rear of Buildings No. 8, 9, 10, 11 & 12.

1966 - 1969

- (1) The Unit Plan of Operation, which had been in effect since November, 1962, was redesigned in 1966 into five units to provide improved treatment.

The Unit Plan allowed for the observation of patients to determine if further hospitalization was needed. Three functional units were designed.

Unit I: Building Nos. 10, 11, 12 & 14

Unit II: Building Nos. 4, 8, 39 & 82

Unit III: Building No. 13

These units became the basis for the hospital's psychiatric services.

(2) At a cost of \$200,000, the boiler plant was converted from coal to gas.

1975-1993

Since 1975, further construction adaptations, interior renovations and additions have been made. A Telephone Building (No. 157) was constructed on the east side of Building No. 11 in 1975. Building No. 157 and Building No. 11 physically touch one another, but do not have any interior connection between them. Currently, another addition to Building No. 157 is under construction. This new addition will house additional telephone switching gear for the growing campus. This particular addition is the reason for this report (HABS). Also, a new entry is under construction on the south side of Building No. 2, and should be completed in 1993.

Presently, the Department of Veterans Affairs Medical Center contains 661 beds and adjoins a 205-bed Nursing Home Care Unit. The center provides extensive medical care including comprehensive psychiatric, primary and secondary, and long term care. Fully accredited by the Joint Commission on Accreditation of Healthcare Organizations, the hospital includes several specialized services. These include the following: Intensive Care Unit, 74-bed Substance Abuse Treatment Unit, Outpatient Alcohol/Drug Abuse Treatment Program, Geriatric Evaluation Unit, Day Treatment Center, Inpatient and Outpatient Post Traumatic Stress Disorder Programs, and a Mental Health Clinic. The hospital buildings are now located on a 206 acre site, seven miles west of downtown Battle Creek. The original 675 acre site was reduced over the years, as various parcels were sold to the City of Battle Creek (VA Medical Center Building History).

The landscape is yet another feature of the hospital site that has undergone extensive changes. The original 675 acre site had only 15 trees when construction started. Mr. Howard B. Cole, with the help of patients, removed large rocks and stones and leveled the sandy site. Loads of top soil were brought in and by 1927, the lawns were completed and a sprinkler system was installed.

Between 1927 and 1930, approximately 9400 trees of all types were planted on the 675 acre site at a cost of \$1,308. Shrubs were also planted in areas not practical for grass or trees. Also in 1927, Doctor Kellogg was adding a wing to the Battle Creek Sanitarium and was forced to remove a number of English Walnut trees. It is rumored that these trees were originally grown at Mr. Vernon, Virginia. Through the efforts of Howard Cole, these English Walnut trees were transplanted to the hospital grounds (Hill, 4).

The landscape has not changed significantly in design or layout since 1924. But, all plants and trees have matured over the years and the center is now surrounded by a forest-like buffer of trees. In addition, the campus setting enjoys a variety of mature trees and plants located between all buildings and along roads and walkways.

Work cited:

- (1) Hill, Barbara, G.; The Quiet Campaign; 1978; Battle Creek, Mich; 3rd Edition. Pgs. 1-5, 15, 25, 29, 34, 54, 104, 131, 176, 177-180.
- (2) The Battle Creek Moon - Journal; 16 October 1924; "Thousands at New Hospital."
- (3) The Battle Creek Enquirer and THE EVENING NEWS; 16 October 1924; "Government Always Trying to do Right Thing, Finally Succeeds"
- (4) The Battle Creek Enquirer and THE EVENING NEWS; 16 October 1924; "War Vets Be Made to Feel At Home, Plea"
- (5) The Battle Creek Moon - Journal; 14 October, 1924; "Electrify New Camp Hospital."
- (6) The Battle Creek Moon - Journal; 17 October, 1924; "Veterans Hear Hospital Head."
- (7) The Battle Creek Moon - Journal; 22 October, 1924; "...Patient at New Hospital - Transferred from Indiana and came Unexpected."
- (8) The Battle Creek Enquirer and THE EVENING NEWS; 15 October 1924; Central Electric Company Advertisement.
- (9) Mollenhoff, Gjore J.; Tupek, Karen R., National Register of Historic Places Inventory - Nomination Form No. 10-306; United States Department of Interior; National Park Service; Washington, DC, 4 April 1980.
- (10) Rutter, William E., Bureau of History Inventory Form; Michigan Department of State; Michigan Historical Commission Meeting 20 December 1989.
- (11) Michigan Historical Commission letter; 3 January 1990; Signed by Martha Bigelow, Director of the Bureau of History; Michigan Department of State.
- (12) Medical Center Building History; Veterans Administration; Battle Creek, Michigan 1993. Pgs. 1-4.

(13) Some individual original drawings (but no complete sets) were located in Engineering Services at the Battle Creek DVAMC for buildings 1,2,3,4,5,6,7,8,9,10,11,12,13,14,16,17,18,19,20,21,22,24 & 25 (file folders No. 1,2,2-1,2B,3,4,4A & 5). Included in this group was one elevation sheet for buildings #8,9,10,11,12, & 13. Contact Mr. Gary Wilson, Chief or Randy J. Crandal, Project Engineer at Battle Creek DVAMC, Engineering Services (616) 966-5600 Ext. 4142 or 5499.

Project Information

This HABS report was prepared in response to the requirements of the Memorandum of Agreement between the Department of Veterans Affairs, The Michigan State Historic Preservation Office and the Advisory Council on Historic Preservation, dated April 1993.

The Memorandum of Agreement resulted from the need of the Department of Veterans Affairs to construct an addition to Building No. 157, which was determined to be unavoidable, but having an adverse effect on a property (Building No. 11) determined eligible for the National Register of Historic Places.

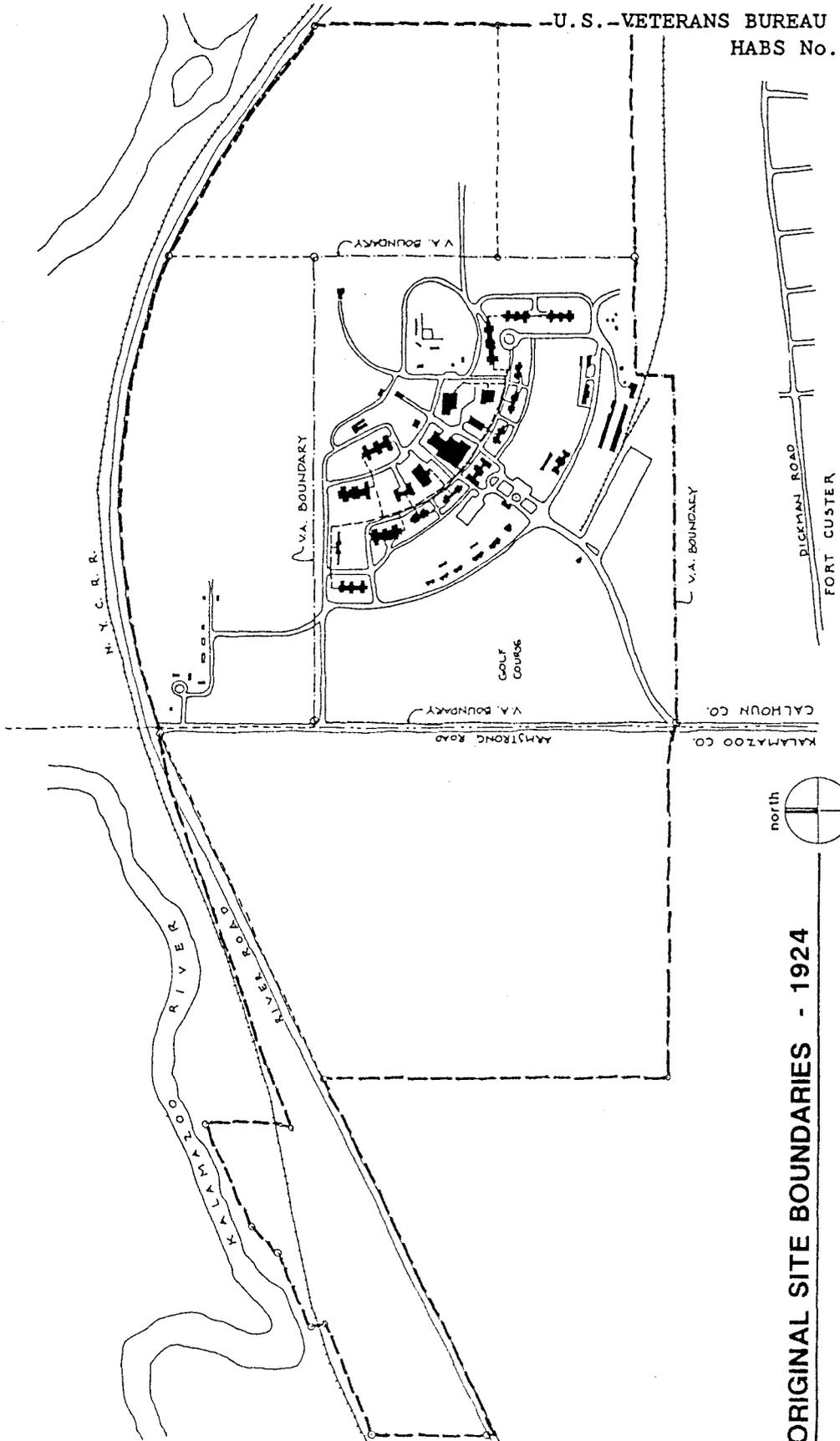
HISTORIAN: Tiffany B. Dziurman
Giffels Consultants Inc.

RESEARCH
ASSISTANT: Michael Stozicki
Giffels Consultants Inc.

GRAPHICS: Xene Colina
Giffels Consultants Inc.

PHOTOGRAPHER: Gary Cialdella
Arcadia Photographers, Inc.
1249 Portage Street
Kalamazoo, MI 49001

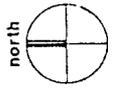
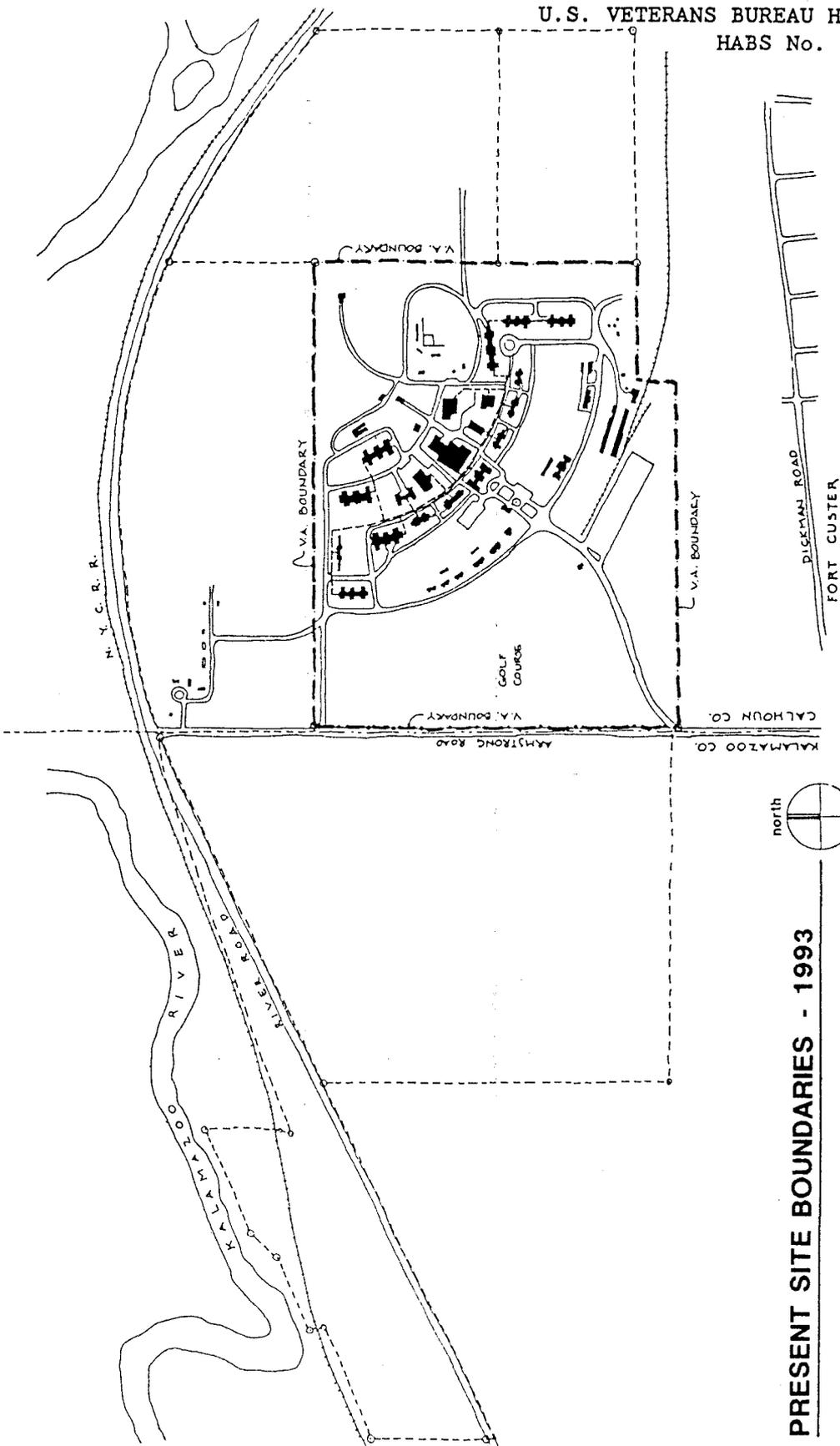
HISTORIC
ARCHITECT
AND
SUPERVISOR: John J. Dziurman AIA
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June 22, 1993



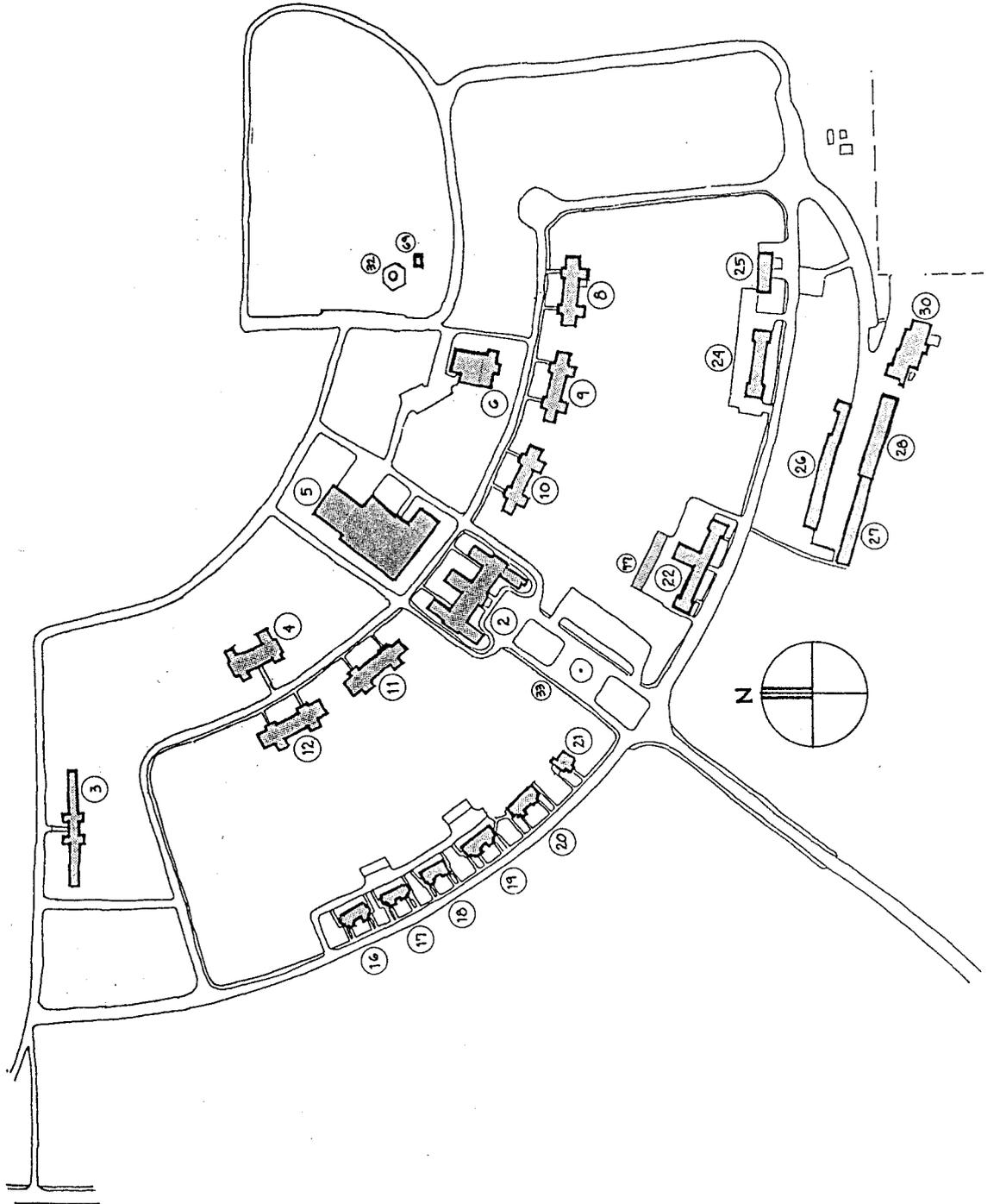
ORIGINAL SITE BOUNDARIES - 1924

The following site plans were prepared by Giffels Consultants Inc. in June, 1993. The information used to produce these plans was provided by the Veterans Administration Medical Center in Battle Creek, Michigan.

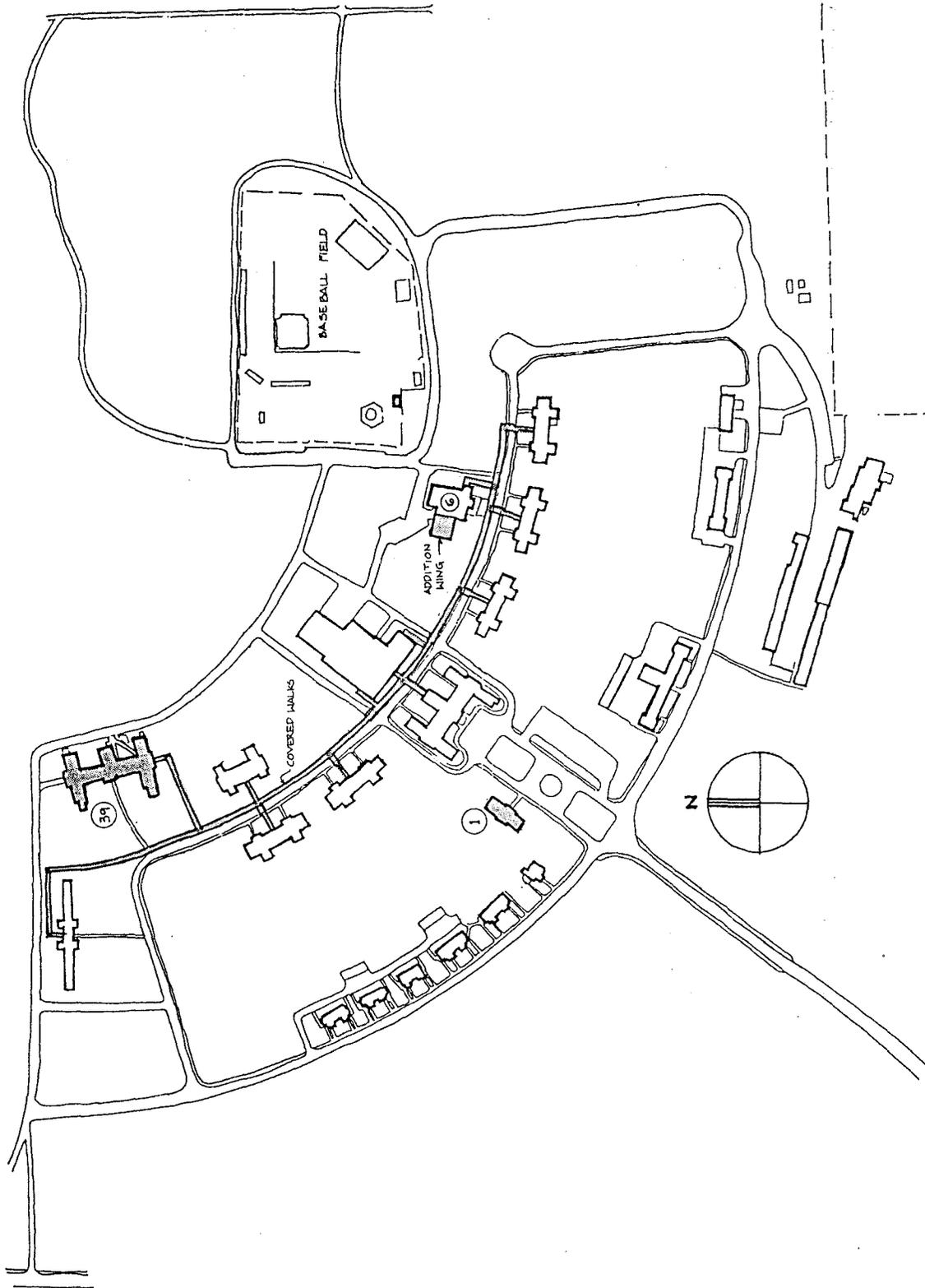
U.S. VETERANS BUREAU HOSPITAL No. 100
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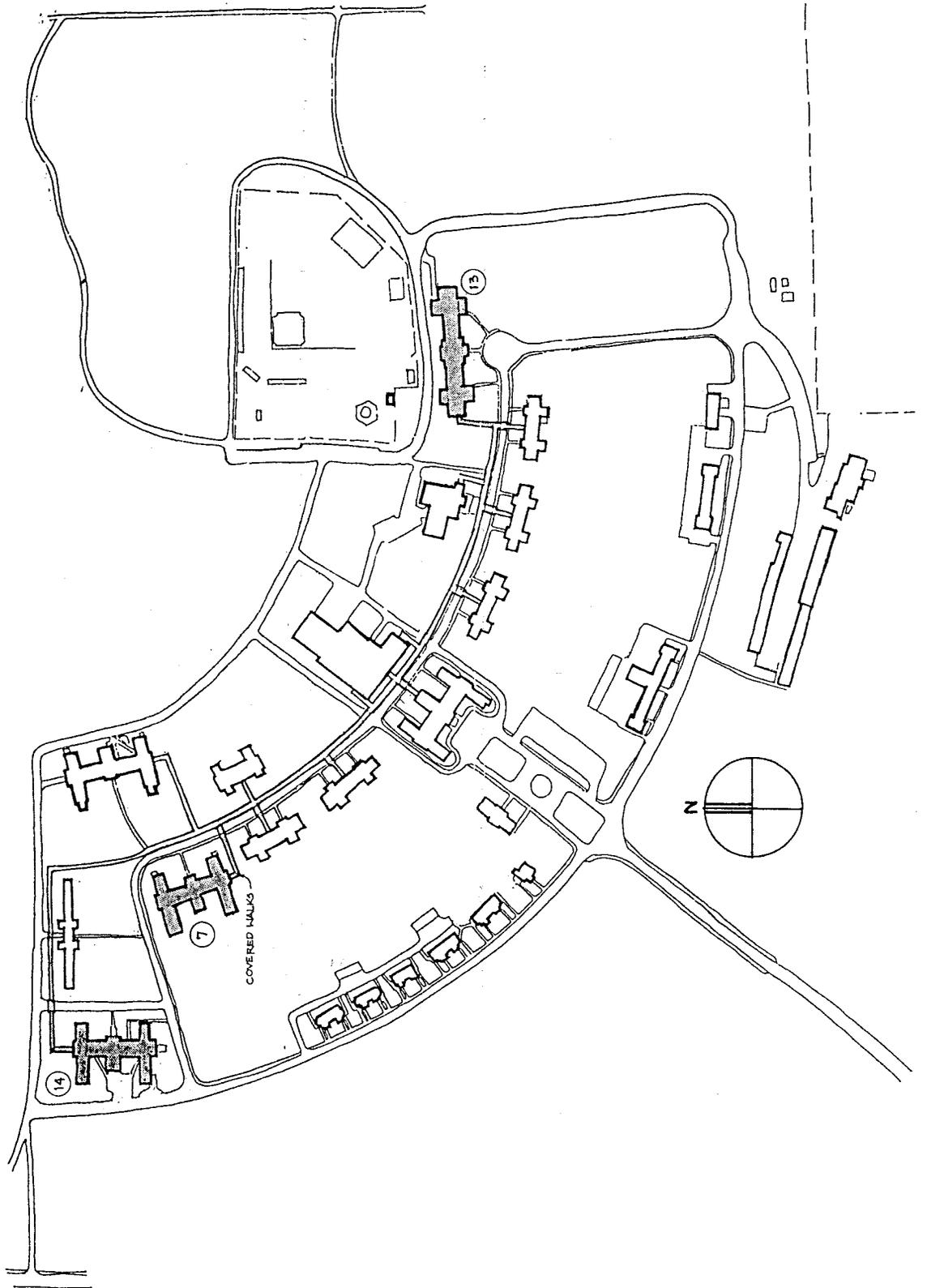
PRESENT SITE BOUNDARIES - 1993

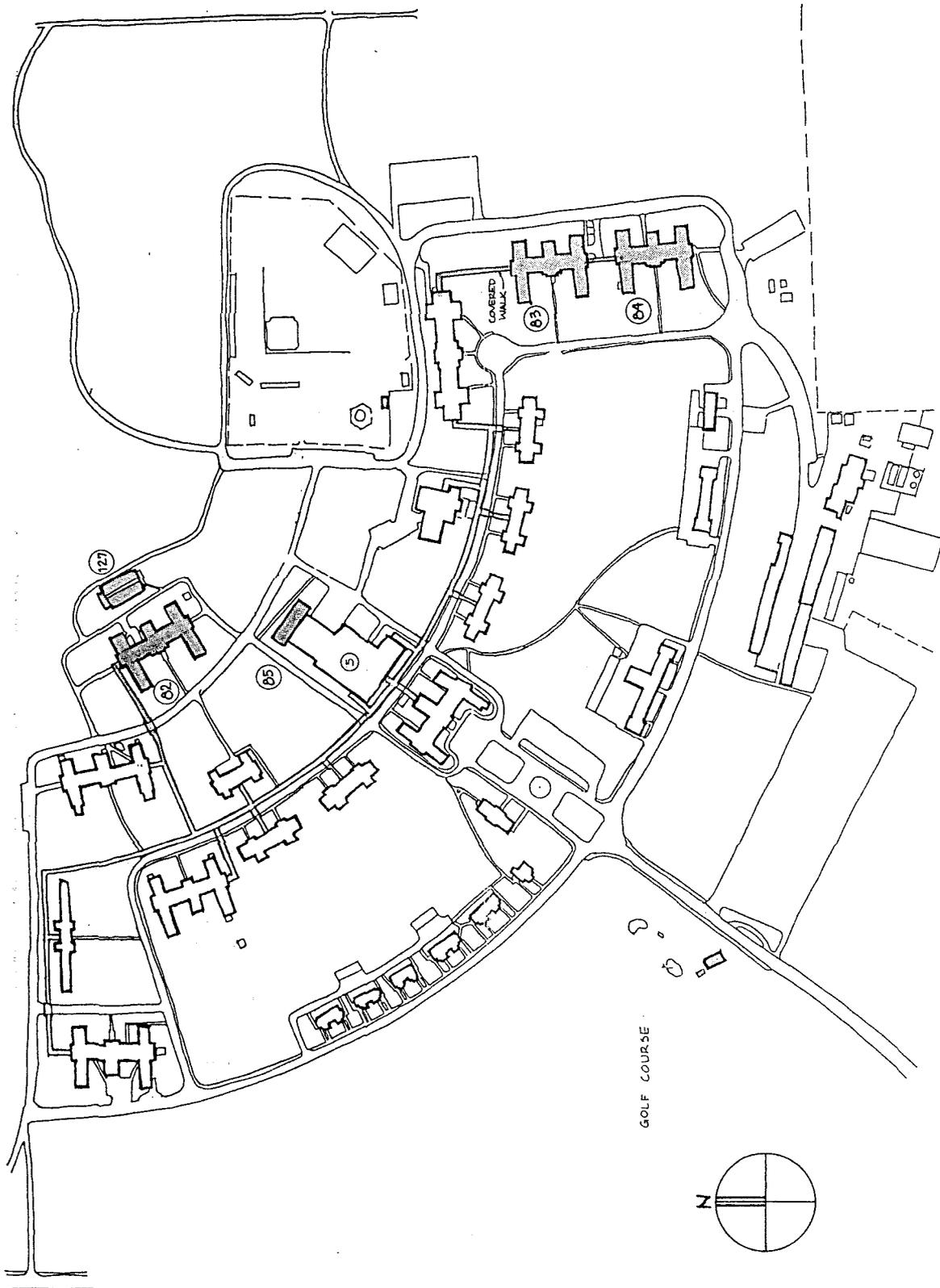


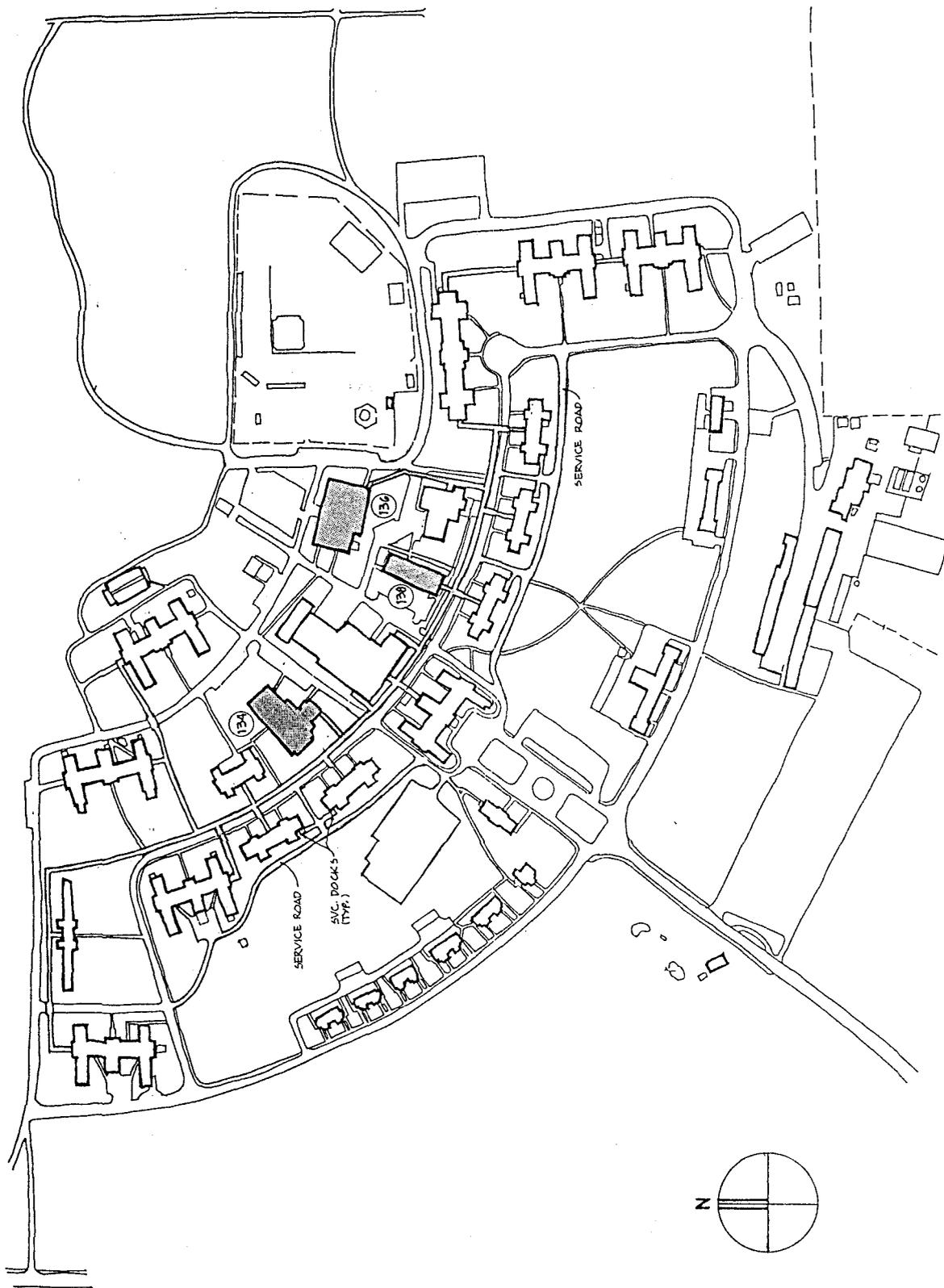
ORIGINAL DEVELOPMENT 1923 - 1924



1926 & 1932 -1932







1959 - 1963

