

Errors and Omissions in Nomination Leading to Inappropriateness of Designation
for 4501 Poplar Street

prepared for:

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4501 attached to central building, 2009



4501 no longer connected after city demolition in 2009

Executive Summary

The nomination for the property at 4501 Poplar Street is incomplete and inaccurate and should be rejected by the Philadelphia Historical Commission. The nomination fails to mention that it was turned down by the Executive Director in a letter dated February 24, 2015 because the core of the historic fabric of the institution had been demolished – by the city in 2009. As such it was the conclusion of the Commission staff that the complex no longer had sufficient integrity to warrant designation of a remnant piece and that the state historical marker was an adequate solution to marking the history.

As this report makes clear, the demolition in 2009 by the city of the core of the complex also rendered the remaining fragment comprising the property now known as 4501 Poplar Street unusable because it lost its central heat source. The nomination fails to note from readily available sources 1.) that according to a city permit, the former infirmary building was abandoned in 2012 and further 2.) in light of its abandonment, that its owner had received a city permit in 2016 to cut off the utilities to begin demolition. The nomination further fails to mention that the building has been unheated and unmaintained since the 2009 demolition of the core of the institution. Nor does the nomination discuss obvious issues of physical deterioration that are characteristic of buildings of the period and are clearly visible.

The property on which the nominated remnant stands was subdivided into separate parcels in 1985 (deed dated 8/28/85; tax parcel 77-4-033500) to resolve a zoning issue. After the demolition of the core building by the city, the central parcel of the complex was sold at sheriff's sale in March 2013 (recorded 31 January 2014) to an unrelated owner ("Full Care LP") forcing its purchase by the present owner in May 2014 to provide parking for the nursing home staff and visitors. The only role for the property is as parking with the existing building a liability.

Finally, were the building to be designated, its repair and reuse would require recreation of all of its utilities, as well as reconstruction of all of its interior finishes at such a cost as to force its abandonment with risk to the economics of the retirement home whose target market is underserved in Philadelphia.

Background

An application for historic designation nomination has been filed for 4501 Poplar Street. That nomination largely relies for significance on the building's role as a part of the Home for Aged and Infirm Colored Persons, an early home for the aged and infirm members of the Black community that was founded by Stephen Smith, an African American, former slave and later entrepreneur. It adds the career of Hobart Jackson to resolve the problem of the loss of the Smith-era campus but ignores available facts that explain the various changes in the institution since the 1980s when declining financial circumstances led to the operation of the site by the Mercy Douglass organization and in this century, by the sale assets of the complex leaving the healthcare facility in the hands of a for-profit business. Only the 1960s residence tower of the Smith Home remains in the hands of a non-profit. Left out of the narrative as well is the fact that the former infirmary (Cunningham Building) was cut off and physically abandoned because of the city-sponsored demolition in 2009 of the core institutional structure to which the Cunningham Building was attached.

As accurately noted in the Commission staff's letter of rejection to the 2014 nomination, dated 24 February 2015, (See Appendix, Fig. 1. pp. 20-21) the historic core of the institution, the Smith / Laing Buildings and the Parker Building had recently been demolished with a loss of site integrity such that in the opinion of the commission staff, the remaining fragments of the complex no longer had "... the capacity to convey that significance."

Long before the 2014 PHC nomination, the infirmary function in the Cunningham Building had been abandoned after little more than a decade in that use. This change in the mid-1970s left the former infirmary to function as a non-housekeeping rooming facility. In 1985 the former Smith Home property was divided into three separate parcels, one for the Smith apartment tower, one for the present Centennial Building nursing home, and one for the original central building and the attached nursing home (Fig 3, 4, pp. 23, 24). In 2009, the deteriorated condition of the central Smith / Laing buildings and the power plant and nuisances associated with them caused the city to condemn and demolish them leading to the vacant property's sale in 2013 by the sheriff. The present operator of the nursing home in 2016 began the process of demolition of 4501 Street by cutting off the utilities.

Because the former infirmary / non-housekeeping facility was an addition to the original central building, it was constructed without its own furnace as a heat source. As such it was a fragment of the original complex and was unviable on its own. As a non-viable fragment it should not have been individually designated.

Given the diminished value to the healthcare complex and the cost of adding an entire heating system, the former infirmary was vacated in 2009 (Fig. 8, p. 28). The "Parcel B" property containing the site of the demolished Smith / Laing buildings including the adjacent formerly attached Cunningham Building was then sold at sheriff's sale to a third-party speculator who had no connection to the nursing home. Because that parcel provided critical parking and ambulance access, the lessee as of 2012 and as of 2016, the owner of

the nursing home, negotiated a purchase from the sheriff's sale buyer (See deeds, end of Appendix). The purchase was made by a separate entity, Myron Poplar Inc., that was created to shield the nursing facility from any liabilities because the abandoned building was becoming a nuisance to the community and the nursing home.

Errors and Omissions in the Present Nomination

Given the 1.) lack of accurate information about the physical history of the institution; 2.) the failure to cite the still convincing reasons provided by Dr. Farnham in his letter of February 24, 2015 for the rejection of the previous nomination; 3.) the impact on the infirmity complex of the demolition of the core buildings by the city; 4.) the lack of recognition that the infirmity was an incomplete fragment, incapable of being operated on its own because it lacked a heating system (evident in the aerial photographs in the nomination because there is no chimney, Fig. 8); 4.) the city's role in the demolition and separate sale of the core building; 5.) the Licenses & Inspections (L&I) permits for closing and sealing of the Cunningham Building in 2012; and 6.) the 2016 L&I permit to begin demolition with the disconnection of the building from the city sewers; leading to 7.) the infirmity building's present ruinous physical condition that would require a nearly total rebuild of all interior surfaces and systems, the nomination should be rejected as inaccurate, incomplete, and because of additional information below, not in the public interest. Further, because significant and critical parts of the history of the institution have been left out of the designation application, the nomination should be rejected.

The Recent History and Actual Physical Condition

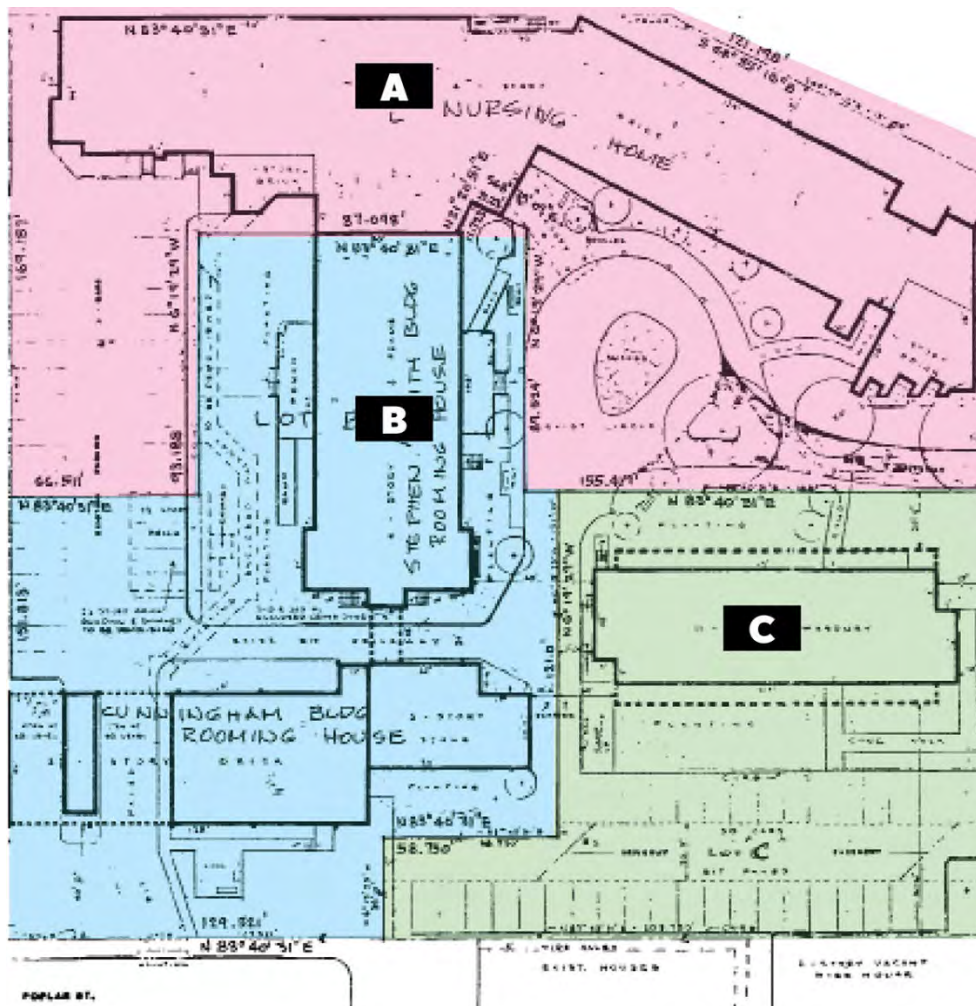
Among the documents that are readily available but apparently were not examined for the present nomination for the property listed as 4501 Poplar Street are the zoning and L&I files together with aerial photos dating back to 2009 that are contained in the Philadelphia Atlas. From those documents it is clear that in 1985 the property of the Smith Home had been broken into separate parcels (Fig. 3, p. 23) as part of the sale of the 1976 nursing home on Girard Avenue to the Mercy Douglass Center. At a later date, the present nursing home and the original central building and infirmity annex were subdivided into separate parcels. At present three parcels are listed in the Philadelphia Atlas by address. These are 4400 W. Girard Avenue (Lot A); 4501 Poplar Street (Lot B); 1030-1042 Belmont Avenue (Lot C).

The entity with the greatest relation to the historic Smith Home for the Aged and Infirm is the Stephen Smith Tower at 1030-1042 Belmont Avenue (Lot C) which remains in the original use and continues as a non-profit elderly housing facility (<https://property.phila.gov/?p=881446550>).

The 1976-77 nursing home at 4400 W. Girard Avenue (Lot A, Fig. 3), built to replace the Parker, Smith / Laing buildings was detached from the south portion of its property when the city condemned, demolished, and took ownership of the site of the demolition in 2009. Because this parcel formed the central institution, the 4400 W. Girard Avenue parcel files contain the richest tranche of information about the complex in the Philadelphia Atlas (<https://property.phila.gov/?p=881437000>). While

the nursing home includes a copy of a portrait of Stephen Smith in the lobby, the building functions as a for-profit entity entirely distinct from the former Smith home.

The subject of the nomination, (Lot B) now listed at the address of 4501 Poplar Street, was initially subdivided from the main nursing facility fronting on W. Girard Avenue complex in 1985 to resolve a zoning issue. The city demolished the Smith / Laing buildings in 2009 (Fig. 8, p. 28) because the buildings, dating from 1870/71 and 1883-4, were so deteriorated that they were abandoned and had become a nuisance and a danger to the complex. When that parcel (Lot B) was sold at sheriff's sale in 2013, it eliminated necessary staff and visitor parking as well as vehicular access. This forced the lessee of the nursing home to acquire the property. It is leased to the nursing home for its parking and vehicular access which forms the value of the site. The Philadelphia Atlas covers that site: (<https://property.phila.gov/?p=881437050>).



1986 property subdivision plan, "Lots, A, B, C." Phila Atlas; Lot A is Nursing home

While 4400 W. Girard Avenue (Lot A.) and 1030-1042 Belmont Avenue (Lot C) are in active use relating to their original purpose, the Philadelphia Atlas makes it clear that 4501 Poplar Street (Lot B) is not in any condition for use. In 2012, because it had been vacant and was no

longer being longer heated or maintained, (Fig. 8, p. 28), the building at 4501 Poplar Street, was licensed by the city Department of Licenses and Inspections as being vacant:

City of Philadelphia An official website of the City of Philadelphia government Here's how you know

Property History

Permits, licenses, violations & appeals by address

L&I dashboard / Property history / 4501 POPLAR ST / Business license: 569209

3219 VACANT RESIDENTIAL PROPERTY / LOT

LICENSE NUMBER: 569209

L&I District: WEST

OPA Account #: 881437050

4501 POPLAR ST

Philadelphia, PA 19104

Inactive

License number	569209
License type	3219 Vacant Residential Property / Lot
Status	Inactive
Date issued	Jul. 19, 2012
Inactive date	Not Available
Contact	MERCY DOUGLASS CENTER INC
Contact address	3827 POWELTON AVE Philadelphia, PA 19104 USA

Screen shot, 4501 listed as vacant property, July 19, 2012, Philadelphia Atlas #569209

Four years later in 2016, seven years after the infirmary building was cut off from the campus central heating plant, its demolition began by cutting it off from the city sewers.

This was done with the approval and encouragement of city councilwoman Jannie Blackwell. A readily discovered document in the Philadelphia Atlas, Plumbing Permit #730824, issued to Sam Wexler Plumbing, Huntington Valley, PA 19006, on 21 October 2016, L&I District West, OPA Account # 881437050 listed the proposed work as “Cap off sewer line so building can be demoed” and further stated the work as “completed.”¹ That permit resolved other violations in the summer of 2016.² There is other related evidence as well in the Philadelphia Atlas making it clear that the building had been abandoned seven years earlier when the central building was demolished by the city:

¹ <https://li.phila.gov/property-history/search/permit-detail?address=881437050&Id=730824> (accessed April 2022).

² <https://li.phila.gov/property-history/search?address=881437050> (accessed April 2022).

City of Philadelphia
An official website of the City of Philadelphia government
Here's how you know

Property History
Permits, licenses, violations & appeals by address

L&I dashboard / Property history / 4501 POPLAR ST / Permit: 730824

PLUMBING PERMIT
730824
L&I District: WEST
OPA Account #: 881437050
4501 POPLAR ST
Philadelphia, PA 19131-0000

ISSUED 10/21/2016

L&I district	WEST
Permit number	730824
Permit type	PLUMBING PERMIT (PP_PLUMBNG)
Type of work	EZPLUM CAP OFF SEWER, LINE SO BUILDING CAN BE DEMOED
Permit status	COMPLETED
Date issued	Oct. 21, 2016
Zoning documents	No zoning documents
Contractor	SAM WEXLER PLUMBING INC 2571 HUNTINGDON PIKE HUNTINGDON VALLEY PA 19006-

Plumbing permit #730824; "Cap off sewer, line so building can be demoed," "Completed" Oct. 21, 2016

Given these circumstances, with its heat source cut off when the central building was demolished and reflecting conditions that have arisen out of its thirteen years of abandonment, reuse of the building at 4501 Poplar Street is impossible.

History of the Cunningham Building

The initial infirmary, the Laing Building, was added to the core Smith building in 1883-4. It included an elevator and was described as being of fireproof construction.³ A larger infirmary was built in 1901 that ironically did not include an elevator nor was it fireproof. That structure was further enlarged by the present Cunningham Building which was designed and constructed in 1960-1961. In the 1970s, little more than a decade after its opening, the use of the so-called "Cunningham building" as an infirmary was abandoned. Thus its role as an infirmary was limited to little more than a decade. As evidenced in the 1986 site plan (Fig. 4, p. 24) for the Mercy-Douglass Center, Inc. prepared by Livingston/Rosenwinkel, P.C., the 1901 and 1961 infirmary buildings were then adapted as a non-

³ The elevator that meant that infirm patients could be readily carried to their rooms in the infirmary – a feature left out of the 1901 building. See: *Nineteenth Annual Report: Home for the Aged and Infirm Colored Persons* (Philadelphia: American Printing House, 1883) p. 7. <https://www2.hsp.org/files/original/121/3583/17220.pdf> (Accessed July 2022).

housekeeping rooming facility under the care of the Mercy Douglass Medical management. The roles of the buildings on “Lot B” were described as “40 non-housekeeping units to accommodate 110 persons” in the Smith Building while the Cunningham Building was projected as non-housekeeping units to accommodate 56 beds. As shown in unsigned and undated plans in the planning archive (Fig. 6, p. 26), the tiny infirmary rooms were to be adapted with two beds per room with skilled care removed to the main 1976-77 building along W. Girard Avenue. In this use the former infirmary building was of minor value to the home and in turn was minimally maintained reflecting its declining role. The last improvements to the Cunningham Building occurred in 1991 when the original bright metal frame windows were replaced with inexpensive dark-finished metal windows, the roof was repaired, and an AC unit was installed on the roof (See permit, Fig. 7, p. 27). Livingston / Rosenwinkel were again the architects.⁴

>The decision to demolish the core building that provided HVAC services to the former infirmary in 2009, to entirely abandon the former infirmary in 2012, and then to begin demolition in 2016 are critical parts of the history that should have been included in both the present nomination and the 2014 nomination.

>Careful inspection of the aerial views (Fig. 8, p. 28) would have made clear that the 1960s infirmary had no chimney to serve an independent heating plant meaning that without a steam source for the heating system, the infirmary was unusable.

>Further because demolition requires the preservation of the property, the obvious physical deterioration of the visible exterior, resulting from period construction as well as from the abandonment should have also been discussed in the nomination.

>Lacking the above information, it would be impossible for the staff and the designation committee to properly review the impact of designation on the subject property.

>When a structure is significantly deteriorated, caused in part by city actions that detached the building from the main complex, designation would overly burden the healthcare facility and not be in the public interest.

Physical Condition of the Subject Structures

The buildings today suffer from original design and material choice decisions, from limited maintenance reflecting the deteriorating economics of the Smith Home, and for the past thirteen years from not being heated and maintained. Since they were vacated, they have become a target of vandalism with broken windows across all facades that have let in water. Despite continuing efforts by the owner to seal the building, plywood panels have been pried off permitting access with resulting damage and theft of copper piping. The interior damage is obvious in photographs of the buildings as they presently exist (see p. 14). Again

⁴ Permits #355232 (9.10.86) # 386951 (4.4.91). See appendix.

these issues were not addressed in the nomination and the absence of discussion of these issues in the nomination makes it difficult if not impossible for the staff and the designation committee to accurately judge the inappropriateness of designation.

Issues of the 1901 Building

The 1901 building is a small footprint structure supported on load-bearing brownstone perimeter walls with the internal structure carried on an un-fire-proofed center wood post in turn carrying wood beams and flooring. Where the 1883 Laing infirmary was of fireproof construction and had an elevator, the 1901 building lacked those critical features. Most of the wood original windows have been removed. Ragged holes in the north façade mark where the original bridge connection to the Smith / Laing building was crudely demolished and temporarily stabilized in 2009. Given the lack of repair to the masonry at the time of the demolition, there was clearly no intent to reuse the building.



South façade with boarded up windows; first floor with supporting center wood post.



Removed bridge, unrepaired masonry where bridge removed, north façade; deterioration of brownstone, south façade.

Failures of 1960s Building Construction

The 1960s infirmary addition was constructed without a basement or a boiler room because it relied on the main complex for heat. It was designed with a reinforced concrete structure with external piers carrying cantilevered sunscreens on the south-facing façade. Exterior walls are infilled with brick panels carried on the concrete floor slabs, lighted by strips of windows with narrow, bright aluminum frames. The south façade sunscreens were formed of reinforced concrete continuous with the floor slabs. They took the form of extremely slender, tapering, un-weatherproofed planes cantilevered out from the structure. Because of their slenderness and the permeability to water into the exposed upper concrete surfaces, the underlying rebar of the structure has rusted and expanded causing significant damage to all of the exposed concrete elements. This is readily visible and should have been noted in the designation report.

On the basis of such readily observable issues, the statement that the building is in “fair” condition is clearly inaccurate. With the knowledge of the fact that the building has been abandoned for more than a decade, “ruins” would be more accurate – and should have a significant impact on the decision as to whether to designate the facility.



Rebar damage in stair tower and water penetration through cantilevered door canopy



Dark lines where canopies are cracking with rebar rust and expansion; cracking of pier surfaces at floor level



Additional rebar damage in canopies, cracking at floor levels in piers. Graffiti from interior access.



North side stair tower, rebar exposure, slenderness of canopy slab and water damage in canopy above doorway, modern replacement windows with smashed glazing; rust jacking at window heads; brutal removal of bridges from brownstone building with no attempt to repair the damage suggesting that reuse was never contemplated.



Detail sunscreens, water erosion of surface cement, rust damage to rebar

Additional Building Condition Issues

The building shows numerous conditions reflective of the character and time of construction that would be costly to repair. Every exterior system shows the beginnings of significant problems, some caused by material choices in the original construction, others by lack of maintenance conditioned by expectation of immediate demolition.



Rebar expansion from rust in concrete; lintel expansion with resultant masonry step-cracking above attic door



Rust jacking of lintel cracking bricks above with cast stone coping permitting water access into masonry



Significant rust jacking and destruction of rear platform suggestive of incipient failure in other unprotected concrete surfaces; pier cracking at ground.

Because the focus of the nomination is on the exterior facades only, the conditions of the interior are not discussed. They are relevant to the discussion here because all of the interior finishes and most of the construction are unusable after thirteen years of abandonment. Reuse would require a nearly total rebuilding of the interior.



Interior vandalism, soil stacks smashed by vandals; evidence of water damage throughout building



Interior water damage; rusted-out metal lath that would require the replacement of all of the interior wall and ceiling finishes; inoperable copper fin-tube radiators removed, all interior surfaces beyond repair



Improperly installed windows; caulked in with gaps between window heads and ceiling; condition evident in many locations now being further compromised by rusting of the exposed steel lintel above the window

The Historical Commission Rejection of the 2014 Nomination

When the building was nominated in 2022, the nomination failed to mention or discuss the previous letter from the PHC letter (Farnham to Leech, 24 February 2015, Appendix, pp. 20-21) to the Preservation Alliance that rejected the nomination on the critical grounds of the loss of integrity of the remainder of the site with the recent demolition of the core original buildings. Obviously nothing has happened in the seven intervening years to undo the losses of the first decade of this century and the integrity is further diminished.

>In their letter the Historical Commission questioned whether the property at 4501 Poplar Street in its current form was able to represent the historical significance of the complex and whether the nomination makes a cogent argument for the property's capacity to convey that significance.

>Further the Commission letter points out the lack of any direct connection between the twentieth century buildings and the long-dead Stephen Smith.

>Finally, the PHC review noted that while the nomination contends that the 1901 building and its 1960 addition represent mid-nineteenth-century socio-cultural shifts in the treatment of the elderly and infirmed, it did not explain the role that the infirmary played in the daily lives of the residents or how the activities that took place in it relate to historical shifts that occurred 50 years earlier.

>In summary, per the letter of the PHC, the 2014 nomination did not present a cogent case that the infirmary alone can bear the weight of representing Smith, the institution, or the long-removed cemetery that formed part of the site.

>Given the ongoing deterioration of the subject buildings, present conditions make it even less likely for the buildings to convey the history of the site.

>Finally the Commission contended that the Pennsylvania Historical & Museum Commission marker that stands on Belmont Avenue is the best means for commemorating this site and educating the public about its significance in light of the fact that so little of the early fabric survives.

As the Commission noted in its original rejection letter, the loss of most of the original building fabric of the Smith Home meant that the Pennsylvania Historical and Museum Commission sign better served the role of commemorating the site.

Comparable Buildings and Significance

A significant issue is why would one choose to preserve this particular building at this point in its history? Is there such historical value that would require preservation? By 1959, the architectural firm of Bellante & Clauss was of minor interest. Their period of greatest interest had been in the 1930s when they brought aspects of European modernism to the United States and again in the mid-1950s when Ehrmann Mitchell and Romaldo Giurgola were in the firm. Mitchell & Giurgola left in 1957 to form their own partnership long before the design of this building. At the time that Bellante & Clauss designed the Cunningham Building they were largely relying on publicly-funded projects or serving as office of record for more important designers. The building itself was already significantly outdated for medical care as evidenced by the short-term use of the building in its original function.

It should also be noted that the nomination provides no context for understanding the history of infirmaries in Philadelphia or post-World War II institutional health facilities in the Philadelphia region. Philadelphia hospitals had been important centers of innovation from the construction of the first wing of the Pennsylvania Hospital in the 1750s. Infirmaries as a form of medical outreach across the city began to be chartered at the end of the 18th century with purpose-built structures such as the Philadelphia Dispensary, built in 1801, on Fifth Street south of Chestnut Street to serve the city's indigent population. Specialized facilities such as McLellan's Institution for Diseases of the Eye and Ear followed, providing access to specific medical skills. By the mid-19th century numerous specialized hospitals including Wills for eyes, Preston's Retreat for Gynecology, and so on were established. Later examples of rational planning in mental health facilities were built in the distant suburbs of West Philadelphia in the 1830s and 1850s, the first, the Institute of Pennsylvania Hospital, later the Asylum for Women was designed by Isaac Holden and his former assistant Samuel Sloan following the rationalist symmetrical plan of the asylum at Charenton, France. Sloan later would follow with a similar design for the men's building for the Institute.

By the end of the 19th century with an understanding of germ theory, institutions began to construct infirmaries to separate sick patients from the general population. The Home for Aged and Infirm Colored Persons was among the first to build the Laing Building to provide separate quarters for the ill with the particular features of an elevator and fireproof

construction that were described in the *Nineteenth Annual Report* for 1883.⁵ Bryn Mawr College's battlemented Infirmary of 1892-3 adapted a converted laboratory to a cottage hospital. Haverford College followed shortly with its Morris Infirmary and Princeton College hired Philadelphians Baker & Dallett to design a campus infirmary in 1892. Institutions in the near suburbs of Philadelphia such as the Haye's Mechanics Home created an infirmary in the early twentieth century; Those institutions with immediately neighboring hospitals, such as the University of Pennsylvania, apparently did not find a separate infirmary necessary.

The first and second infirmaries of the Home for Aged & Infirm Colored Persons were in keeping with the chronology of such buildings. However, where most infirmaries offered some specialized medical care, the 1883 and 1901 Home for Aged & Infirm Colored Persons were little more than dormitories apparently separated by gender. The architect of the 1901 building, Edwin Bertollett is a minor figure who was listed as a graduate in Civil Engineering of the Polytechnic College of Philadelphia, but received no biographical treatment in their *Historical Record of the Polytechnic College of the State of Pennsylvania* (1890). Much of his career was spent in the outlying areas of the state designing modest dwellings. A lecture by Bertollett on "Fireproof Construction" given in 1901, at the time of the design of the infirmary called for "no wood in its construction," and further called for floors to be "cement or tile finished," with no flammable connections to other buildings.⁶ These requirements were ignored in the 1901 infirmary's wood interior framed and posted building that was connected via a flammable bridge to the main complex.

By the late 1950s publicly funded institutions were constructing their own infirmary buildings as support for skilled nursing. Examples are the Ballinger-designed infirmary for the Ellis School in the Philadelphia suburbs (1952), or the George B. Roberts-designed infirmary for nearby Christ Church Hospital (1959). Contemporary public institutions such as the Riverview Home for the Indigent updated earlier buildings for a Central Infirmary in 1959. These were usually modern in detail, as per the case of the Ballinger design for the Ellis School building with sunscreens above the south facing windows. As infirmaries became instruments for application of specialized medical technologies, buildings of a certain vintage were replaced to meet current medical and technological capacity. The shift to non-housekeeping housing at the Cunningham Building reflected changing technology and staffing issues that were best served in the 1976-77 main building.

Role of Buildings in Philadelphia's African American History

The present nomination focuses on the role of administrator Hobart C. Jackson (1916-1978), in an attempt to meet Criterion A that in the original nomination of 2014 was focused

⁵ The elevator that meant that patients could be readily carried to their rooms in the infirmary – a feature left out of the 1901 building. See: *Nineteenth Annual Report* p. 7. <https://www2.hsp.org/files/original/121/3583/17220.pdf> (Accessed July 2022). Additional information is included in the *Twentieth Annual Report*, p. 10.

⁶ "Absolute Fireproof Construction," in "News, Notes and Notions," *Real Estate Record and Builder's Guide*, 67: No. 1749 (New York, 21 September 1901): 350.

on Stephen Smith (1795-1873). While Jackson played a significant role in the institution as director from 1949 until his death, the infirmary addition of 1960-1961 was a minor part of the campus and its purpose was undone by later Jackson projects. In the 1960s, Jackson took advantage of new funding sources from the federal government and used those sources to rebuild much of the Smith complex beginning with the Smith Tower of 1966 that provided 140 housekeeping units. The new nursing facility of 1976-1977 completed the institution's transformation so that all of the critical functions were in new facilities. The merging of the infirmary function into the new central nursing building created a more efficient campus with care staff in one central location. As a consequence, after little more than a decade of use, the infirmary had lost its functional role and could only be adapted to a non-housekeeping residential use, essentially an SRO function.

Notably, when the Smith Home sought out architects for their buildings from the inception of the institution through the completion of the infirmary, they made no effort to retain African American architects. This likely reflected both the absence of African American architects in the profession but also the preferences of the early donors. As a result of these circumstances, all of the institution's early architects were white including Benjamin D. Price (1845-1922), a minor architect known for church plans, who designed the initial Smith building. The Parker Building that followed was the work of Quaker Architect Addison Hutton (1834-1916) who perhaps was chosen for his charitable and institutional work.⁷ Later buildings include the first infirmary (1901, Edwin F. Bertollette) and the 1961 infirmary and Bellante & Clauss for the infirmary extension. Other architects for the Stephen Smith Geriatric Center included Hassinger & Schwam and George Claflen.⁸

The first building on the site in which an African American architect was involved in the design, the 11-story Stephen Smith Tower, was designed by Suer, Livingston & Demas in association with the design firm of Stonorov & Haws.⁹ African American architect Walter Livingston (1922-2011) would later establish his own firm in 1972 as Livingston / Rosenwinkel after working for several years in the office of Eshbach, Pullinger, Stevens & Bruder. The Livingston firm would become named architects for later projects at the site after the Mercy Douglass Center took over the site in the 1980s.

While Hobert Jackson certainly played a significant role in the institution, his most significant and lasting projects have been the Smith Tower and the 1976-7 Centennial Building. And as noted above, the redesign of the campus with the Centennial Building taking on the role of the infirmary led directly to the revised purpose of the Cunningham Building as a non-housekeeping residence and then to its eventual abandonment.

⁷ "Edward T. Parker's Will," *Philadelphia Inquirer*, October 12, 1886, p. 2. Parker's death was reported in the *Philadelphia Inquirer*, October 4, 1886, p. 5 describing his work as a manager for the Philadelphia Almshouse which doubtless increased his awareness of the need for care for the city's African American population.

⁸ The zoning file in the Philadelphia Atlas lists many of the site architects on permits.

⁹ "Smith Towers to Break Ground," *Philadelphia Daily News*, April 29, 1966, p. 47 which lists as architects the well-known housing firm Stonorov & Haws with Suer Livingston and Demas.

Lack of a Public Interest in the Designation

The designation of the former infirmary serves no public interest and in fact would contribute to the economic weakening of the nursing home. The present owner of the 4501 Poplar Street property was forced to acquire the site (5.11. 2014) from the sheriff sale purchaser (1.30.2014, # 52753722 to Full Care LP) in order to provide parking and ambulance access to the nursing home which would otherwise largely be without adequate parking for staff or visitors. When the “Property B” parcel was acquired by the present owner it was with assurances from the city that the buildings on the site could be demolished. Were the nursing home now to be required to preserve and maintain the now significantly deteriorated infirmary facility, it would do significant damage to the economics of the Centennial Nursing facility that could undermine its capacity to survive and continue to serve its community.

Conclusion

Because of the ongoing deterioration of the infirmary after its abandonment in 2009, Dr. Farnham’s conclusion is even more accurate today than when the original letter was written in 2015:

“Unless convinced otherwise, the Commission contends that the Pennsylvania Historical & Museum Commission marker that stands on Belmont Avenue is the best means for commemorating this site and educating the public about its significance in light of the fact that no early fabric survives.”

Dr. Farnham’s letter continues:

“... the Historical Commission is skeptical that the surviving fabric at this site can represent its earlier history and therefore does not recommend revision and resubmission...”

Given the circumstances of the loss of context within the overall site, the modest architectural interest and limited medical significance of the building, the 2009 abandonment of the building and continuing extensive deterioration subsequent to the demolition by the city of its adjacent Smith / Laing building, and the economic consequences of maintenance of the building to the existing nursing facility, there can be no value commensurate with the negative economic impact that such a step would take to designating this building.

A better way to commemorate the evolving history of the Stephen Smith Home would be to require, prior to demolition, that the owner prepare a documentary record with high quality, digital corrected photographs of elevations and details of the two buildings known as 4501 Poplar Street with sketch plans based on those in the Philadelphia Atlas for deposit in the files at the Philadelphia Historical Commission and perhaps, the present institution. The present Pennsylvania Historical and Museum Commission marker on Belmont Avenue in front of the Smith Towers attests to the significance of the site.

Appendix 1: 2015 Letter from Philadelphia Historical Commission rejecting 2014 nomination



CITY OF PHILADELPHIA

PHILADELPHIA HISTORICAL
COMMISSION

Room 576, City Hall
Philadelphia, Pennsylvania 19107
Tel: 215.686.7660
Fax: 215.686.7674

Sam Sherman, Jr.
Chair

Jonathan E. Farnham, Ph.D.
Executive Director

24 February 2015

Benjamin Leech
Preservation Alliance for Greater Philadelphia
1608 Walnut Street, Suite 1300
Philadelphia, PA 19103

Re: Nomination of 4501 Poplar Street, the Stephen Smith Home

Dear Mr. Leech:

Thank you for submitting a nomination to the Philadelphia Historical Commission proposing the designation as historic of the property at 4501 Poplar Street, the Stephen Smith Home. The Historical Commission's staff has reviewed the nomination and, pursuant to Section 5.8.a of the Commission's Rules & Regulations, has determined that it is incorrect and incomplete. The staff therefore returns the nomination to you with the following explanation of its deficiencies.

Before offering a critique of the nomination, the Historical Commission would like to state that it emphatically agrees with the nominator that Stephen Smith, the Stephen Smith Home, and Olive Cemetery all hold great historical significance. However, the Historical Commission questions whether the property at 4501 Poplar Street in its current form is able to represent that historical significance and whether the nomination makes a cogent argument for the property's capacity to convey that significance.

The nomination proposes the designation of a 1901 infirmary building, its 1960 addition, and some open land around the building. It stipulates a Period of Significance of 1901 to 1966. It generally contends that the property satisfies Criterion A for its association with Stephen Smith, Criterion I for the archaeological potential of a small section of the former Olive Cemetery, and Criterion J for its association with mid nineteenth-century socio-cultural shifts in the treatment of elderly and infirmed African Americans. However, the ages of the surviving building and addition and the Period of Significance do not correspond to the Criteria cited. First, Stephen Smith founded the home in 1864 miles away in Society Hill. Smith died in 1873 and the Stephen Smith Home did not move to its current location until 1881. Second, the nomination never explains how a relatively minor building constructed in 1901, nearly three decades after Smith's death, represents Smith's historical significance. The nomination notes that the building was constructed on a small segment of Olive Cemetery, an early African American cemetery, but never offers any historical information about the cemetery or explains how a 1901 infirmary building and its limited surroundings represent the history of a garden or rural cemetery founded in 1849 and dismantled about 1920. Finally, the nomination contends that the 1901 building and its 1960 addition represent mid nineteenth-century socio-cultural shifts in the treatment of the elderly and infirmed, but does not explain the role that the infirmary played in the daily lives of the residents or how the activities that took place in it relate to historical shifts that occurred 50 years earlier. In summary, the nomination does not present a cogent case that the infirmary can bear the weight of representing Smith, the institution, or the cemetery. Moreover, the Historical Commission doubts that such a case can be made because the early fabric at this site has been

lost. Until convinced otherwise, the Commission contends that the Pennsylvania Historical & Museum Commission marker that stands on Belmont Avenue is the best means for commemorating this site and educating the public about its significance in light of the fact that no early fabric survives.

While the Historical Commission is skeptical that the surviving fabric at this site can represent its earlier history and therefore does not recommend revision and resubmission, it offers the following suggestions if you do decide to update the nomination.

Above all else, a revised nomination must cogently explain how these later structures represent the earlier history. By definition, a nomination that delimits its Period of Significance as 1901 to 1966 cannot represent events that occurred in 1849, 1864, or 1881. The vast majority of the Statement of Significance is devoted to nineteenth-century events, before the infirmary was constructed. To be successful, the nomination must explain how these events are represented by the later structures. Second, if the nomination cites Criterion I, it must provide a history of Olive Cemetery and make some claim about potential resources at the site associated with that cemetery. If all structures associated with the cemetery were demolished and the remains disinterred and reinterred elsewhere by 1920, what archaeological potential does the site hold? And, if the former cemetery does hold archaeological significance, should not the entire former cemetery be nominated?

In addition to the providing more information and restructuring the arguments related to the capacity of surviving resources to convey historical significance, the nomination should be edited to improve the quality of the writing, especially as it relates to word choice. The nomination should eschew referring to the elderly and African Americans with the term "folks," which can be interpreted as paternalistic and ageist. Other word choices are also disconcerting. Colloquialisms should be avoided. For example, the nomination states that "In a perverse twist, the old age home was now conveniently located near a black cemetery, making burial of the residents less of a hassle" (page 15). The meaning of "perverse" is misunderstood. The term "hassle" seems inappropriate when discussing the convenience or inconvenience of burying a human being. The nomination also states that "some patients that were too old were rejected for fear that they would suck up funds" (page 12). In addition to the misuse of "that for "who," the sentence includes the colloquial term "suck up," which should have no place in a nomination. Numerous other grammatical mistakes and stylistic idiosyncrasies inhabit the nomination and should be corrected. While the Historical Commission does not suggest revision and resubmission, if the nomination is revised, it should be carefully proofread before being resubmitted.

Thank you for submitting the nomination. However, the Historical Commission cannot accept it in its current state. Please contact Erin Cote of the Historical Commission's staff if you have questions about this letter or the nomination process generally.

Yours truly,



Jonathan E. Farnham, Ph.D.
Executive Director

Fig. 1 Letter from Jonathan Farnham to Ben Leech, Preservation Alliance, February 24, 2015

Files from Philadelphia Atlas

S.L.D. Plan 1954 3/76

C APPLICATION FOR ZONING PERMIT AND/OR USE REGISTRATION PERMIT
CITY OF PHILADELPHIA
DEPARTMENT OF LICENSES & INSPECTIONS

9/9

NOTE: The requirements for this permit are in addition to all others required by law or regulation. The issuance of this permit does not imply that a building permit or other permits will be issued if the specifications do not conform with the Building Code, Plumbing Code, Housing Code, Fire Code and all other pertinent laws or regulations.

Application is hereby made for the permit or permits required by the Philadelphia Zoning Ordinance before commencing the use or the work described herein, and as shown on accompanying plan.

LOCATION OF PROPERTY (Street and House Number)
S.W. Corner Girard & Belmont Thru to Poplar

situated on South side of Girard Avenue Street
at the distance of 0 feet 0 inches from South side
of Belmont Avenue Street
Front feet inches. Depth feet inches.

If lot is irregular in shape, give deed description below:

**RECEIVED
DEPT. OF
LIC. & INS.
JUL 20 1976
PERMIT**

*zoning
first
4400 W. Girard
W. H. H. H.*

EXPLAIN ANY ALTERATIONS OR PROPOSED CONSTRUCTION
Erect a 4 story Nursing Home Structure and a connecting
Hallway to the existing Cunningham Building. Demolish the
existing Parker Building

STORIES AND HEIGHTS FROM GROUND TO ROOF

HEIGHT	EXISTING BUILDING			PROPOSED ADDITION, ALTERATION OR NEW BUILDING		
	FRONT	SIDE	REAR	FRONT	SIDE	REAR
In Feet						
In Stories						

TABULATION OF USES

FLOOR NO.	PRESENT USE	LAST PREVIOUS USE	DATE LAST USED
	Nursing Home Housing 140 beds (Parker and Smith Buildings)		

DOOR NO.	PROPOSED USE OF PRESENT BUILDING	PROPOSED USE OF ADDITION OR NEW BUILDING
	Parker to be demolished	Nursing Home - 180 Beds
	Smith - Vacated - Future probable use - Out Patient Care	Replacing 140 out of compliance. Beds and Adding 40 Additional Beds - Chapel

Additional use information, if required *Parking Grade and Surfaces, etc.*
than 10% slope + Proper Barriers

APPLICANT Stephen Lazovitz
ADDRESS 4400 W. Girard Avenue
PHONE

ARCHITECT OR ENGINEER Stephen Lazovitz
ADDRESS 191 Presidential Blvd.
PHONE 667-4717

CONTRACTOR Newbold/Lazovitz
ADDRESS Bala Cynwyd, Pa.
PHONE

APPLICATION NO. 62811
DISTRICT DESIGNATION R-9 & R-13 Res
ZONING MAP NO. 4A-3
P. & VOL. PL. 14-1360
WARD
PREVIOUS APPLICATION 5-3-71
CALENDAR NO. 76-0547
ZONING REFUSED 7-21-76
USE REFUSED 7-21-76
APPEAL 7/21/76
APP. GRANTED VA 1386-88 *9/15/76*
APP. REFUSED
REF. TO B. OF A.
REF. GRANTED
REF. REFUSED

THIS SPACE FOR OFFICIAL STAMP
DEPT. OF LIC. & INSPECTIONS
CITY OF PHILADELPHIA
ZONING AND USE REGISTRATION
PERMITS
NO. 243343
DATE 11-12-76
☒ PERMIT GRANTED IN
ACCORDANCE WITH Z.O.
CERTIFICATE
NO. VA 1386-88
DATE 9-15-76

Fig. 2 Philadelphia Atlas: Permit for present nursing facility, vacating of Smith Building; 11, 12, 1976

C APPLICATION FOR ZONING PERMIT AND/OR USE REGISTRATION PERMIT
CITY OF PHILADELPHIA
DEPARTMENT OF LICENSES & INSPECTIONS

NOTE: The requirements for this permit are in addition to all others required by law or regulation. The issuance of this permit does not imply that a Building permit or other permits will be issued if the specifications do not conform with the Building Code, Plumbing Code, Housing Code, Fire Code and all other pertinent laws or regulations.

Application is hereby made for the permit or permits required by the Philadelphia Zoning Ordinance before commencing the use or the work described herein, and as shown on accompanying plan.

LOCATION OF PROPERTY (Street and House Number)
4400 GIRARD AV - SW COR BELMONT TO

situated on _____ side of _____ Street
at the distance of _____ feet _____ inches _____ from _____ side
of _____ Street _____
Front _____ feet _____ inches. Depth _____ feet _____ inches.

If lot is irregular in shape, give deed description below:

EXPLAIN ANY ALTERATIONS OR PROPOSED CONSTRUCTION
 Sub-division of one lot into three lots as follows:
 Lot "A" - A four story 180 Bed Nursing Home.
 Lot "B" - Two existing bldgs for rooming house, 118 beds in one bldg and 56 bed in the other.
 Lot "C" - An eleven story apt bldg for the elderly, with 144 units.

STORIES AND HEIGHTS FROM GROUND TO ROOF

HEIGHT	EXISTING BUILDING			PROPOSED ADDITION, ALTERATION OR NEW BUILDING		
	FRONT	SIDE	REAR	FRONT	SIDE	REAR
In Feet						
In Stories						

TABULATION OF USES

FLOOR NO.	PRESENT USE	LAST PREVIOUS USE	DATE LAST USED
4	4 story Nursing Home		
3	Room House - 2 bldg	Stop Smith Bldg 4-Story	
2	Cunningham House 3 story		
1	11 story apt - house placed w/ parking		

PROPOSED USE OF PRESENT BUILDING
 Lot A - 4 story Nursing Home w/ PKG w/ new driveway
 Lot B - Stephen Smith & Cunningham Home - 4 story 3 story w/ PKG
 Lot C - 11 story apt - 11 story Home w/ PKG w/ parking

PROPOSED USE OF ADDITION OF NEW BUILDING

Additional use information, if required _____

OWNERS
 MERCY-Douglass Center, Inc. Address: 4508 Chestnut St
ARCHITECT OR ENGINEER
 Address: _____
CONTRACTOR
 Address: _____
APPLICANT
 Walter R. Livingston Jr. Address: 1322 Parrish St
 81-16 (Rev. 12/63)

APPLICATION NO. 104879
DISTRICT DESIGNATION R9 + R13
ZONING MAP NO. 4A-3
F. A. VOL. PL. 14-1360
PREVIOUS APPLICATION 75490
CALENDAR NO. 86-0783
ZONING REFUSED
USE REFUSED
APPEAL 5/20/86
APP. GRANTED CERT.
APP. REFUSED CERT.
REF. TO B. OF A. CERT.
REF. GRANT TWO CERT.
DEPT. OF LIC. & INSPECTIONS CITY OF PHILADELPHIA
THIS SPACE FOR OFFICIAL STAMP
ZONING AND USE REGISTRATION PERMITS
NO. 355232
DATE 9-10-86
PERMIT GRANTED IN ACCORDANCE WITH ZBA
CERTIFICATE
NO. 1A988-993
DATE 7/31/86
 With proviso

Fig. 3. Philadelphia Atlas: Subdivision of property for purchase by Mercy Douglass Center, 7/31, 1986

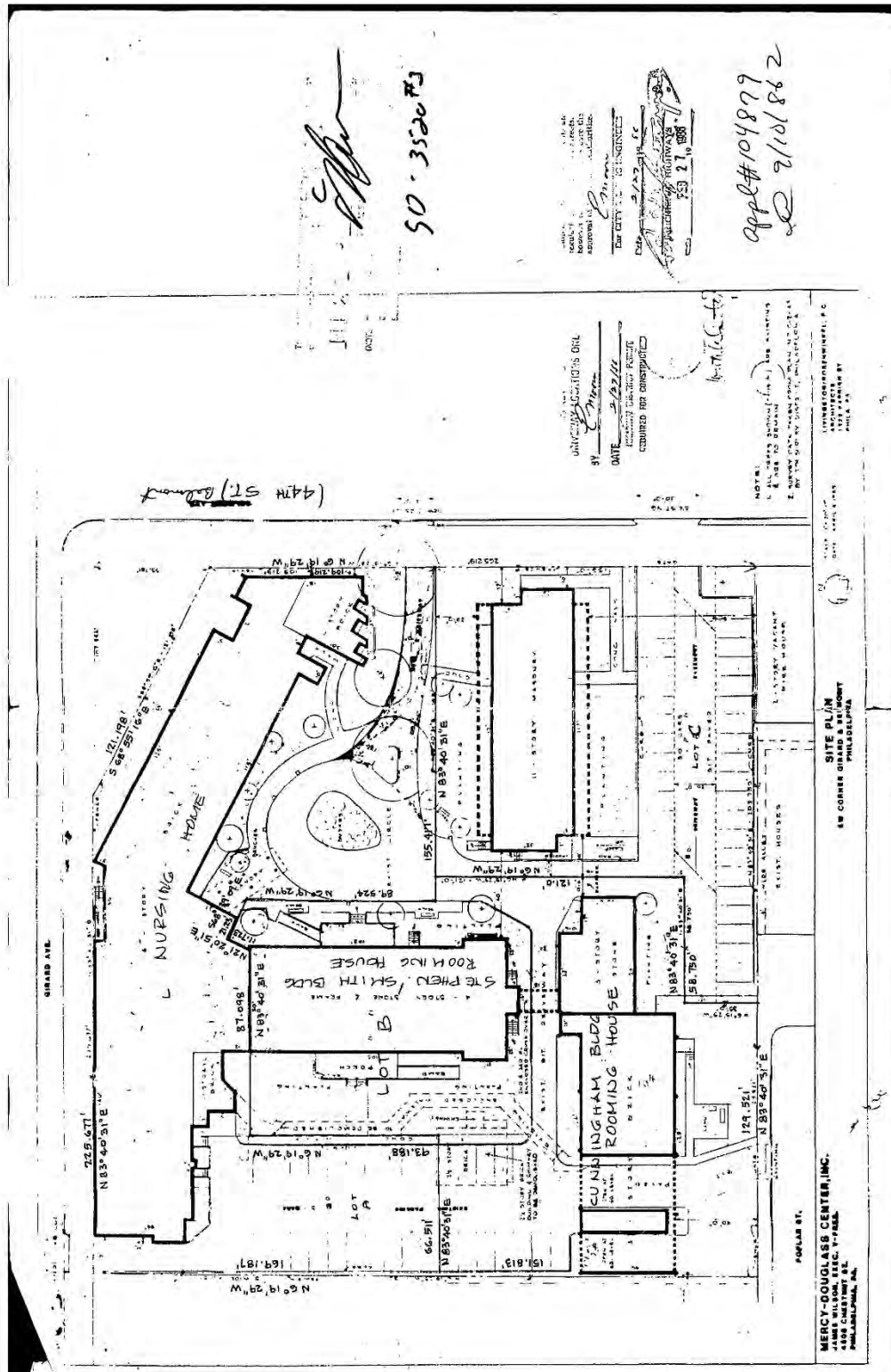


Fig. 4. Philadelphia Atlas: Site plan 9, 10, 1986

SLIDE PLAN 1954 6/76

C APPLICATION FOR ZONING PERMIT
AND/OR USE REGISTRATION PERMIT
9/9 CITY OF PHILADELPHIA
DEPARTMENT OF LICENSES & INSPECTIONS

NOTE: The requirements for this permit are in addition to all others required by law or regulation. The issuance of this permit does not imply that a building permit or other permits will be issued if the specifications do not conform with the Building Code, Plumbing Code, Housing Code, Fire Code and all other pertinent laws or regulations.

Application is hereby made for the permit or permits required by the Philadelphia Zoning Ordinance before commencing the use or the work described herein, and as shown on accompanying plan.

LOCATION OF PROPERTY (Street and House Number)
S.W. Corner Girard & Belmont Thru to Poplar

situated on South side of Girard Avenue Street
at the distance of 0 feet 0 inches from South side
of Belmont Avenue Street
Front feet inches. Depth feet inches.

If lot is irregular in shape, give deed description below:
Young first 4400 W. Girard

RECEIVED
DEPT. OF
AND INSPECTIONS
JUL 20 1976
PERMIT 1386-88

EXPLAIN ANY ALTERATIONS OR PROPOSED CONSTRUCTION
Erect a 4 story Nursing Home Structure and a connecting
Hallway to the existing Cunningham Building. Demolish the
existing Parker Building

STORIES AND HEIGHTS FROM GROUND TO ROOF

HEIGHT	EXISTING BUILDING			PROPOSED ADDITION, ALTERATION OR NEW BUILDING		
	FRONT	SIDE	REAR	FRONT	SIDE	REAR
In Feet						
In Stories						

TABULATION OF USES

FLOOR NO.	PRESENT USE	LAST PREVIOUS USE	DATE LAST USED
	Nursing Home Housing 140 beds (Parker and Smith Buildings)		

FLOOR NO.	PROPOSED USE OF PRESENT BUILDING	PROPOSED USE OF ADDITION OR NEW BUILDING
	Parker to be demolished	Nursing Home - 180 Beds
	Smith - Vacated - Future probable use - Out Patient Care	Replacing 140 out of compliance. Beds and Adding 40 Additional Beds • Chapel.

Additional use information, if required *Parking Garage and Surfacing, Terraces 1070 Slope & Proposed Barriers*

Stephen Smith Geriatric Center
ADDRESS 4400 W. Girard Avenue
PHONE
ARCHITECT OR ENGINEER ADDRESS PHONE
CONTRACTOR ADDRESS 191 Presidential Blvd. PHONE 667-4717
APPLICANT Stephen Lazovitz ADDRESS Bala Cynwyd, Pa. PHONE
Newbold/Lazovitz

81-16 (Rev. 12/63)

THIS SPACE FOR OFFICIAL STAMP
DEPT. OF LIC. & INSPECTIONS
CITY OF PHILADELPHIA
ZONING AND USE REGISTRATION
PERMITS
NO. 243343
DATE 11-12-76
PERMIT GRANTED IN
ACCORDANCE WITH ZONING
IDENTIFICATION
NO. VA 1386-88
DATE 9-15-76

Fig. 5. Philadelphia Atlas: Demolition of Parker Building, Smith vacated, 11,12, 1976

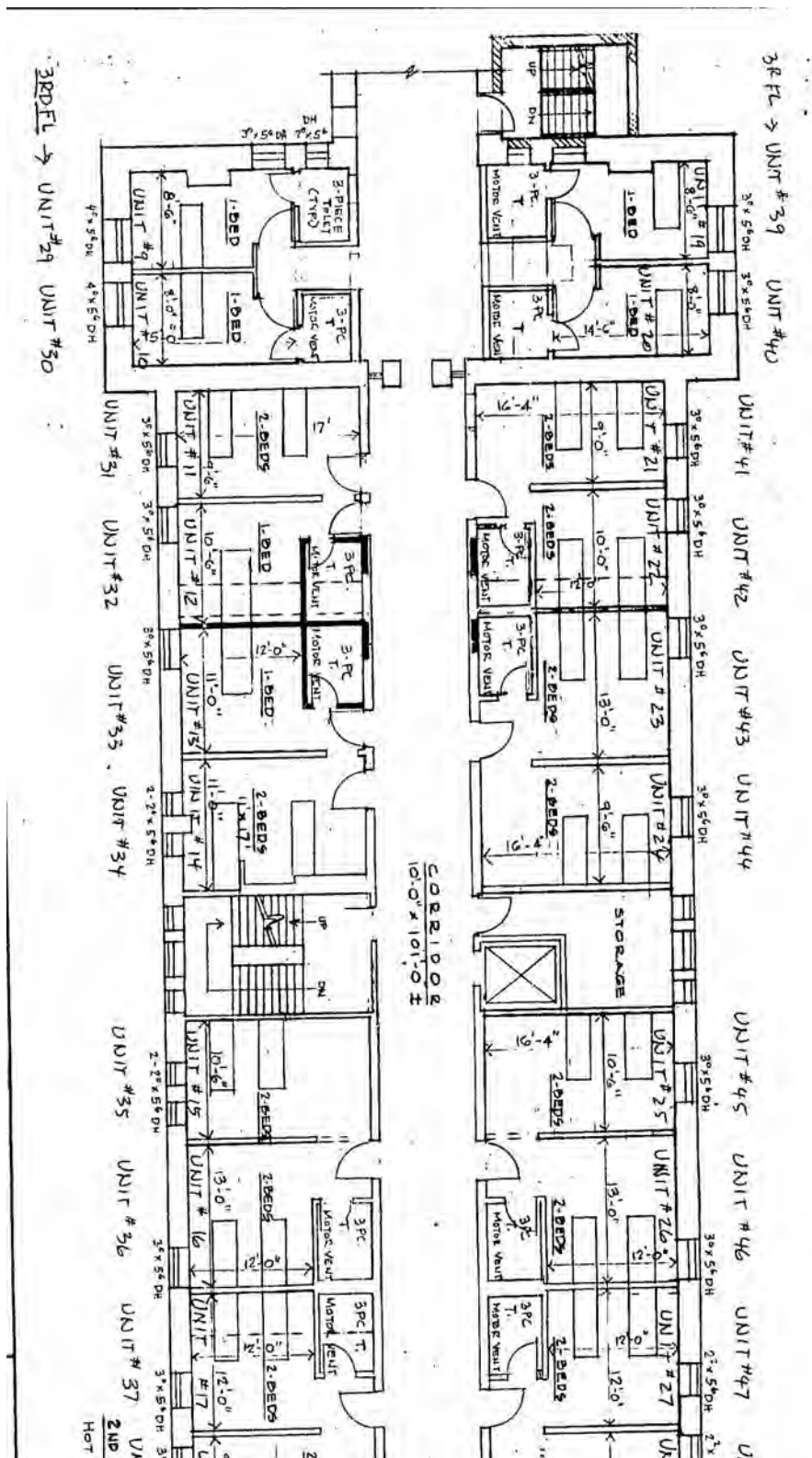


Fig. 6: Philadelphia Atlas: Cunningham Building modification for non-housekeeping units, undated, after 1977.

C APPLICATION FOR ZONING PERMIT AND/OR USE REGISTRATION PERMIT				NOTE: The requirements for this permit are in addition to all others required by law or regulation. The issuance of this permit does not imply that a building permit or other permits will be issued if the specifications do not conform with the Building Code, Plumbing Code, Housing Code, Fire Code and all other pertinent laws or regulations.																														
CITY OF PHILADELPHIA DEPARTMENT OF LICENSES & INSPECTIONS																																		
Application is hereby made for the permit or permits required by the Philadelphia Zoning Ordinance before commencing the use or the work described herein, and as shown on accompanying plan.				APPLICATION NO. 113251																														
LOCATION OF PROPERTY (Street and House Number) 4400 W. Girard Avenue - Lot 6				DISTRICT DESIGNATION R42R13																														
situated on _____ side of _____ Street				ZONING MAP NO. 443 (95) SUB.																														
at the distance of _____ feet _____ inches from _____ side				F. A. VOL. PL. 121-1360 WARD																														
of _____ Street				PREVIOUS APPLICATIONS 104879																														
Front _____ feet _____ inches. Depth _____ feet _____ inches.				CALENDAR NO.																														
If lot is irregular in shape, give deed description below:				ZONING REFUSED																														
				USE REFUSED																														
				APPEAL																														
				APP. GRANTED CERT.																														
				APP. REFUSED CERT.																														
EXPLAIN ANY ALTERATIONS OR PROPOSED CONSTRUCTION				THIS SPACE FOR OFFICIAL STAMP (Do not write in this space)																														
Third floor renovations of Cunningham and Infirmary buildings. Roof repair. Installation of new windows and air condition system. A/A unit on roof - not to exceed 6' x 6' x 6'				386951 4-4-91 <input type="checkbox"/> PERMIT GRANTED IN ACCORDANCE WITH ZBA CERTIFICATE NO. _____ DATE _____																														
STORIES AND HEIGHTS FROM GROUND TO ROOF																																		
<table border="1"> <thead> <tr> <th rowspan="2">HEIGHT</th> <th colspan="3">EXISTING BUILDING</th> <th colspan="3">PROPOSED ADDITION, ALTERATION OR NEW BUILDING</th> </tr> <tr> <th>FRONT</th> <th>SIDE</th> <th>REAR</th> <th>FRONT</th> <th>SIDE</th> <th>REAR</th> </tr> </thead> <tbody> <tr> <td>In Feet</td> <td>33</td> <td>33</td> <td>33</td> <td></td> <td></td> <td></td> </tr> <tr> <td>In Stories</td> <td>3</td> <td>3</td> <td>3</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>								HEIGHT	EXISTING BUILDING			PROPOSED ADDITION, ALTERATION OR NEW BUILDING			FRONT	SIDE	REAR	FRONT	SIDE	REAR	In Feet	33	33	33				In Stories	3	3	3			
HEIGHT	EXISTING BUILDING								PROPOSED ADDITION, ALTERATION OR NEW BUILDING																									
	FRONT	SIDE	REAR	FRONT	SIDE	REAR																												
In Feet	33	33	33																															
In Stories	3	3	3																															
TABULATION OF USES																																		
FLOOR NO.	PRESENT USE		LAST PREVIOUS USE		DATE LAST USED																													
3	Adult day care and nursing home for 26 beds.																																	
	40 non-housekeeping units to accommodate 110 persons																																	
FLOOR NO.	PROPOSED USE OF PRESENT BUILDING		PROPOSED USE OF ADDITION OR NEW BUILDING																															
3	Long-term structured residence for 16 beds. Residence		3.5 FIK ONLY being reduced 35 non-housekeeping units to accommodate 110 persons 24 hr care & supervision																															
Additional use information, if required																																		
OWNER		ADDRESS		PHONE																														
CATCH, Inc.		1409 Lombard St., Phila., Pa. 19146		765-8855																														
ARCHITECT OR ENGINEER		ADDRESS		PHONE																														
Livingston/Rosenwinkel, PC		1322 Parrish St., Phila., Pa. 19123		765-8855																														
CONTRACTOR		ADDRESS		PHONE																														
APPLICANT		ADDRESS		PHONE																														
Walter R. Livingston, Jr., FAIA		1322 Parrish St., Phila., Pa. 19123		765-8855																														

Fig. 7. Philadelphia Atlas: Final renovations to Cunningham Building, 4, 4, 1991.



Fig. 8. Philadelphia Atlas: Top: aerial taken 2009 with Smith Building in center (top arrow) and central brick boiler house (bottom arrow) on left, pre-demolition; Middle: aerial taken 2010 with Smith Building and boiler house demolished; bottom: aerial taken 2021 showing no chimney on roofs of infirmary complex.