Fayetteville (NC) Veterans Administration Hospital Historic District
Fayetteville, Cumberland County, Site Number, Listed 9/19/2012
Nomination by Cultural Resources Analysts, Inc.
Photographs by Cultural Resources Analysts, Inc., April 2012

Main Building

View north on Entrance Drive
Manager’s Quarters

Service Building (center) and Attendants’ Quarters (right)
United States Department of the Interior  
National Park Service  

National Register of Historic Places  
Registration Form  

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

1. Name of Property  

<table>
<thead>
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<th>historic name</th>
<th>Fayetteville (NC) Veterans Administration Hospital Historic District</th>
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<tbody>
<tr>
<td>other names/site number</td>
<td>Fayetteville Veterans Affairs Medical Center / CD0980</td>
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2. Location  

<table>
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<th>street &amp; number</th>
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<td>Fayetteville</td>
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<tr>
<td>state</td>
<td>North Carolina</td>
</tr>
<tr>
<td>county</td>
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3. State/Federal Agency Certification  

As the designated authority under the National Historic Preservation Act, as amended, I hereby certify that this _X_ nomination _request for determination of eligibility meets the documentation standards for registering properties in the National Register of Historic Places and meets the procedural and professional requirements set forth in 36 CFR Part 60.

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

_ national _X_ statewide _ local

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<tr>
<td>State or Federal agency/bureau or Tribal Government</td>
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In my opinion, the property _ meets _ does not meet the National Register criteria.

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<th>Date</th>
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<tr>
<td>State or Federal agency/bureau or Tribal Government</td>
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4. National Park Service Certification  

I hereby certify that this property is:

_ entered in the National Register _ determined eligible for the National Register

_ determined not eligible for the National Register _ removed from the National Register

_ other (explain:) ____________________________________________

<table>
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### 5. Classification

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<td>(Check only one box.)</td>
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<td>□ Contributing</td>
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<tr>
<td></td>
<td>□ object</td>
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#### Name of related multiple property listing

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

**United States Second Generation Veterans Hospitals**

**Number of contributing resources previously listed in the National Register**

**NA**

### 6. Function or Use

<table>
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<th>Historic Functions</th>
<th>Current Functions</th>
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<td>(Enter categories from instructions.)</td>
<td>(Enter categories from instructions.)</td>
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**HEALTH CARE / hospital**

### 7. Description

<table>
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<th>Architectural Classification</th>
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<td>(Enter categories from instructions.)</td>
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**Late 19th and 20th Century Revivals /**

**Colonial Revival / Classical Revival**

**foundation:** Concrete

**walls:** Brick

**roof:** Slate

**other:** Stone
The Fayetteville, North Carolina (NC), Veterans Administration (VA) Hospital, currently known as the Fayetteville Veterans Affairs Medical Center, is located at 2300 Ramsey Street in Cumberland County, approximately 2.5 miles north of downtown Fayetteville. Located in a campus setting, much of the property administered by the Fayetteville Veterans Affairs Medical Center has been developed, but there remains a mix of small open areas, wooded areas with stands of mature trees, and formal landscaping in the areas near the buildings and along the entrance drive from Ramsey Street. The main building is oriented to the northwest, while the current main entrance to the medical center is through the outpatient clinic, which is oriented to the southeast. The original mission of the hospital was to provide general medical and surgical care to veterans, and the surviving campus preserves the general characteristics of this property sub-type. Characteristics of Period II (constructed from the late 1920s through to 1950) general medical and surgical Second Generation Veterans Hospitals include: initial acreage ranging between 50 to 100 acres located on elevated terrain adjacent to adequate roads for transportation; a central, monumental main building that served as the primary focus of the campus; usually only a single additional patient ward building, if any; in certain examples, because of the smaller design of general medical and surgical veterans hospitals in comparison to veterans neuropsychiatric hospitals, maintenance/utility services were incorporated into the dining hall/kitchen building to the rear of the main building, rather than erecting separate buildings to house the station garage and boiler plant; residential quarters for staff members were distanced from the administration/patient care buildings within the campus to provide a separation between the residential and work environment; and the campus often included a recreational building, storehouse, and connecting corridors between the central core buildings. The Fayetteville VA Hospital Historic District shares the majority of these characteristics with a few exceptions, such as: the initial tract of land associated with the hospital was approximately 145 acres in size; the kitchen/dining hall building includes functions normally related to the recreation and storehouse building; and the garage and boiler house were constructed in separate buildings. The polygonal-shaped property contains approximately 58 acres; the boundaries of the Fayetteville VA Hospital Historic District are composed of approximately 32 acres of the parcel. The historic district boundary was developed to include the significant historic resources and open space associated with the hospital, while excluding large parking lots and support and service buildings constructed after the period of significance that are located to the east of the historic district boundary. The district boundary includes twenty-eight resources: eleven contributing and seventeen noncontributing. Contributing resources include those that retain integrity sufficient to convey the historic district’s significance and were constructed during the historic district’s period of significance (1939–1950). A series of earthworks, constructed circa 1865 by Confederate troops, are located within and extend outside of the historic district boundary. These earthworks were listed in the National Register of Historic Places in 1981. Although the earthworks are not associated with the Veterans Administration and were not constructed during the period of significance, the presence and location of this resource requires identification and inclusion in this nomination to ensure consideration in future planning efforts. Seven of the seventeen noncontributing resources are smaller buildings and structures, including maintenance, service, and utility buildings, constructed after 1950 that do not visually impact the larger contributing resources, and relationships between the contributing resources remain intact. Contributing buildings within the historic district include a five-story main building (Resource 1, 1939) with a square, two-story over raised basement outpatient addition (1988); a four-story rectangular service building (Resource 3, 1939); residential quarters; a boiler plant; the laundry; and a connecting corridor, among others. The two most notable alterations to the historic district after 1950 include additions to the main building (Resource 1) and the service building (Resource 3). The medical center’s property consists of level to very steep topography. The modified rectangular boundary of the historic district includes level to gently rolling topography bounded by Ramsey Street (U.S. 401), Facility Drive, and Cochran Drive, and a drive within the medical center property to the rear of the residential quarters that also extends along the edge of a ravine. The historic district contains mature trees and vegetation, linear and curvilinear drives, and buildings with brick exteriors constructed with decorative elements of the Colonial Revival and Classical Revival architectural styles.

**Narrative Description**

The Fayetteville Veterans Affairs Medical Center is located on level to steeply sloping terrain within a campus setting. The property originally consisted of approximately 145 acres but has been reduced over the years to its current size of approximately 58 acres.

See Continuation Sheet (7.1)
8. Statement of Significance

Applicable National Register Criteria
(Mark “x” in one or more boxes for the criteria qualifying the property for National Register listing.)

X A Property is associated with events that have made a significant contribution to the broad patterns of our history.

B Property is associated with the lives of persons significant in our past.

X C Property embodies the distinctive characteristics of a type, period, or method of construction or represents the work of a master, or possesses high artistic values, or represents a significant and distinguishable entity whose components lack individual distinction.

D Property has yielded, or is likely to yield, information important in prehistory or history.

Criteria Considerations
(Mark “x” in all the boxes that apply.)

Property is:

A Owned by a religious institution or used for religious purposes.

B removed from its original location.

C a birthplace or grave.

D a cemetery.

E a reconstructed building, object, or structure.

F a commemorative property.

G less than 50 years old or achieving significance within the past 50 years.

Areas of Significance
(Enter categories from instructions.)

Politics/Government

Health/Medicine

Architecture


Period of Significance
1939–1950

Significant Dates
NA

Significant Person
(Complete only if Criterion B is marked above.)

NA

Cultural Affiliation
NA

Architect/Builder
Construction Service, Veterans Administration

Period of Significance (justification)

The Period of Significance for the Fayetteville Veterans Administration (VA) Hospital Historic District in Fayetteville, North Carolina, begins with the initial construction of the medical facility in 1939, and continues through 1950, which is the date of the last federal veterans hospital constructed utilizing the design philosophies developed for Period II Second Generation VA Hospitals.
The Fayetteville (NC) VA Hospital Historic District is significant as an excellent, intact example of a Period II general medical and surgical Second Generation Veterans Hospital. General medical and surgical hospitals are a sub-type of Second Generation Veterans Hospitals. Period II includes those veterans hospitals constructed from the late 1920s through 1950, the date of the last veterans hospital constructed utilizing the designs developed for the Second Generation Veterans Hospitals. Characteristics commonly associated with the general medical and surgical sub-type of Second Generation Veterans Hospital exhibited by the Fayetteville VA Hospital Historic District include: a smaller campus than typically associated with other sub-types of Second Generation Veterans Hospitals; a monumental main building that serves as the focal point of the campus; only one, if any, additional patient ward/treatment buildings other than the main building; the incorporation of maintenance/utility functions into the kitchen/dinning hall building (in the case of the Fayetteville VA Hospital Historic District this includes the storehouse and the recreational functions); residential quarters for staff members slightly distanced from the central core group of buildings; and central core group buildings connected by enclosed corridors. The Fayetteville VA Hospital Historic District is eligible for listing in the National Register of Historic Places (NRHP) under Criterion A at the state level in the areas of Politics/Government because of the intense campaign effort on the part of local organizations to secure the location of the federal hospital in Fayetteville and its impact on the local community and veterans throughout the state of North Carolina. The Fayetteville VA Hospital Historic District is also eligible under Criterion A in the areas of Health/Medicine at the state level because of the mission of the federal government, through the VA, to provide general medical and surgical care to veterans of World War I and World War II. The Fayetteville VA Hospital Historic District is also eligible under Criterion C in the area of Architecture at the state level because the Fayetteville VA Hospital Historic District is an intact example of a Period II Second Generation Veterans Hospital incorporating elements of classical revival architectural styles that were nationally popular in the early-to mid-twentieth century. The use of porticos, corner quoins, balustrades, and the dominant lantern of the main building (Resource 1, 1939) reflect the influence of the Colonial Revival and Classical Revival styles that were fashionable in the early decades of the twentieth century and continued during the years after World War II. The Fayetteville VA Hospital Historic District gains additional significance for the construction of the monumental main building that serves as the focal point of the historic district. The Fayetteville VA Hospital Historic District also exhibits standardized building designs that were incorporated into the campuses of Period II Second Generation Veterans Hospitals. The design, massing, and architectural elements of the main building (Resource 1, 1939) share similarities to main buildings located at other Period II Second Generation Veterans Hospitals, such as: Fargo, North Dakota; Bath, New York; Lebanon, Pennsylvania (although it was constructed at a much larger scale); and Indianapolis, Indiana. The staff residential quarters of the Fayetteville VA Hospital Historic District are also nearly identical to similar buildings at other Period II facilities. The construction of these similar and nearly identical buildings at various locations demonstrates the VA’s use of standardized designs for Period II veterans hospitals. Construction began on the Fayetteville VA Hospital in 1939, and various additions and new buildings were added through 1950. It was designated a general medical and surgical hospital serving veterans in North Carolina and portions of surrounding states. The historic district continues to retain characteristics of this sub-type of Second Generation Veterans Hospital. The use of nationally popular architectural styles creates a cohesive design for the historic district. The use of revivalist architecture, especially on the main building, reflects the importance of the VA and its mission to provide medical care to the nation’s veterans. Revivalist architecture, such as the Colonial Revival and Classical Revival styles, was utilized for many federal buildings constructed in the first half of the twentieth century to exhibit patriotism through the use of stylistic elements associated with the early history of the United States and to reflect the permanence of the institutions contained within the buildings. The period of significance and assessment of contributing and noncontributing resources for this nomination are based on the historic district's significance within the historic contexts developed in the United States Second Generation Veterans Hospitals Multiple Property Documentation Form (MPDF). Resources constructed after 1950, and thus considered noncontributing within this nomination, may possess significance under themes not fully developed as part of the MPDF. Resources located
within the Fayetteville Veterans Affairs Medical Center campus may be eligible or contributing for other associations or contexts under National Register Criteria A–D, or recent buildings/structures may be eligible under Criteria Consideration G, for resources of exceptional importance that are less than 50 years of age.

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

The Fayetteville (NC) VA Hospital Historic District is an excellent example of a Period II Second Generation Veterans Hospital that retains characteristics of the general medical and surgical sub-type of veterans hospital.

See Continuation Sheet (8.18)

**Developmental history/additional historic context information** (if appropriate)

Historic Narrative See Continuation Sheet (8.23)

9. **Major Bibliographical References**

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

See Continuation Sheet (9.26)

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Previous documentation on file (NPS):

- preliminary determination of individual listing (36 CFR 67 has been requested)
- X previously listed in the National Register
- X previously determined eligible by the National Register designated a National Historic Landmark
- recorded by Historic American Buildings Survey #
- recorded by Historic American Engineering Record #
- recorded by Historic American Landscape Survey #

**Primary location of additional data:**

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

Name of repository: Dept of Veterans Affairs Historic Preservation Office & Facilities Management Office, Fayetteville Veterans Affairs Medical Center

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Historic Resources Survey Number (if assigned): CD0980

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10. **Geographical Data**

**Acreage of Property** Approximately 32 acres

(Do not include previously listed resource acreage.)

**UTM References**

(Place additional UTM references on a continuation sheet.)

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**Name of Property**
Fayetteville (NC) Veterans Administration Hospital Historic District

**County and State**
Cumberland County, North Carolina

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

The boundary of the nominated historic district is delineated by the polygon in solid black lines on a portion of the Fayetteville, North Carolina, and Vander, North Carolina, topographic maps on page 28. The boundary is also indicated by a polygon on the enclosed USGS Fayetteville, North Carolina, and Vander, North Carolina, topographic quadrangle maps. The UTM reference points, stated in NAD 27, are provided above and on the enclosed USGS topographic quadrangle map. The boundary begins at the northwest corner of the historic district at the intersection of Ramsey Street and Cochran Avenue at UTM N 3885046 E 693476, then extends to the southeast for approximately 580 feet near the southern edge of Cochran Avenue to UTM N 3885013 E 693663, then the boundary curves to the southeast approximately 210 feet through a lawn to the eastern edge of the drive to the rear of Resources 7, 6, 5, and 4 to UTM N 3884943 E 693681, then continues to the south approximately 210 feet along the eastern edge of the drive to UTM N 3884886 E 693684, then continuing along the eastern edge of the drive to the south-southwest for approximately 120 feet to UTM N 3884848 E 693675, continuing along the eastern edge of the drive to the southwest for approximately 125 feet to UTM N 3884818 E 693657, continuing to the southwest along the east edge of the drive for approximately 150 feet to UTM N 3884783 E 693620. The boundary continues to the southwest along the eastern edge of the drive approximately 140 feet with a ravine to the immediate east of the drive to UTM N 3884755 E 693605, continuing along the drive to the south-southwest approximately 75 feet to UTM N 3884721 E 693601, then following the eastern edge of the lane as it curves to the southeast for approximately 190 feet to UTM N 3884676 E 693619, then continuing along the northeast edge of the drive to the southeast for approximately 410 feet with the ravine to the northeast of the drive to UTM N 3884595 E 693722, then continuing to the southeast for approximately 70 feet to UTM N 3884575 E 693734, then turning to the southwest the boundary extends to the southwest for approximately 135 feet along the southeast edge of a drive to the southeast of Resource 11 to UTM N 3884556, E 693693, the boundary then extends to the northwest for approximately 350 feet along the northeast edge of a parking lot located southwest of Resource 10 to the east edge of a drive at UTM N 3884619 E 693592, then continuing to the southwest along the southeast edge of the drive for approximately 250 feet to UTM N 3884553 E 693554, then continuing to the southwest approximately 295 feet following the southeast edge of the drive as it extends to the entrance to the facility at Facility Drive to UTM N 3884479 E 693511. The boundary then extends to the west-northwest for approximately 695 feet along a fence line immediately north of Facility Drive to the intersection with Ramsey Street to UTM N 3884528 E 693297, then extends to the northeast for approximately 1,400 feet along the eastern right-of-way of Ramsey Street to UTM N 3884894, E 693446, then following the curve of Ramsey Street to the north approximately 390 feet to the beginning point at the intersection of Ramsey Street and Cochran Avenue, encompassing approximately 32 acres.
Boundary Justification (Explain why the boundaries were selected.)

The boundary for the North Carolina Veterans Administration (VA) Hospital Historic District in Fayetteville, North Carolina, encompasses approximately 32 acres of the 58 acres currently administered by the United States Department of Veterans Affairs. The slightly irregular boundary of the historic district includes level to gently rolling topography bounded by Ramsey Street (U.S. 401), Facility Drive, and Cochran Drive, and a drive within the historic district to the rear of the residential quarters that also extends along the edge of a ravine. The boundary follows clearly defined natural and manmade features that surround the historic resources. The historic district includes eleven contributing and seventeen noncontributing buildings, structures, sites or objects. Seven of the seventeen noncontributing resources are smaller buildings and structures, including maintenance, service, and utility buildings, constructed after 1950 that do not visually impact the larger contributing resources, and relationships between the contributing resources remain intact. The historic district boundary was delineated to not only include the significant historic buildings, constructed with brick exteriors and incorporating Colonial Revival and Classical Revival architectural style decorative elements, but also the majority of the open space and site elements associated with the Fayetteville VA Hospital, including mature trees and vegetation, linear and curvilinear drives, and lawn areas. The majority of these elements are located west of the main building (Resource 1) and the residential buildings (Resources 4, 5, and 7, all 1939). The boundary for the historic district also includes the main entry road from Ramsey Street, its associated landscaped median, and its extension along the front of the residential quarters (Resources 4, 5, and 7, all 1939). Excluded from the boundary are the large parking lots east of the main concentration of historic buildings and an assemblage of post-1950 support and service buildings paralleling roadways at the historic district’s eastern boundary.

11. Form Prepared By

name/title Dean Doerrfeld, Architectural Historian; Patrick Thompson, Architectural Historian; Matthew McMahan, Architectural Historian; and Trent Spurlock, Architectural Historian
organization Cultural Resource Analysts, Inc.
date June 29, 2012
street & number 151 Walton Avenue
telephone 859-252-4737
city or town Lexington
state KY
zip code 40508
e-mail

Additional Documentation
Submit the following items with the completed form:

- Maps: A USGS map (7.5 or 15 minute series) indicating the property's location.
  A Sketch map for historic districts and properties having large acreage or numerous resources. Key all photographs to this map.

- Continuation Sheets 28–30

- Additional items: (Check with the SHPO or FPO for any additional items.)
Photographs:
Submit clear and descriptive photographs. The size of each image must be 1600x1200 pixels at 300 ppi (pixels per inch) or larger. Key all photographs to the sketch map.

Name of Property:

City or Vicinity:

County:     State:

Photographer:

Date Photographed:

Description of Photograph(s) and number:

See Continuation Sheet (31)

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

name

street & number  telephone

city or town  state  zip code

Paperwork Reduction Act Statement: This information is being collected for applications to the National Register of Historic Places to nominate properties for listing or determine eligibility for listing, to list properties, and to amend existing listings. Response to this request is required to obtain a benefit in accordance with the National Historic Preservation Act, as amended (16 U.S.C.460 et seq.). Estimated Burden Statement: Public reporting burden for this form is estimated to average 18 hours per response including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding this burden estimate or any aspect of this form to the Office of Planning and Performance Management. U.S. Dept. of the Interior, 1849 C. Street, NW, Washington, DC.
One of the more significant topographic features of the Fayetteville Veterans Affairs Medical Center property is the Confederate breastworks (Resource A, 1865). The breastworks are made up of a line of earthen fortifications that range in height from approximately 1 or 2 feet to 6 or more feet. They extend across the medical center’s property for over 1,000 feet. At least two cuts may be observed along the breastworks for roads and sidewalks. The breastworks were constructed on the north side of Fayetteville late into the Civil War as a defensive measure by Confederate defenders of Fayetteville after General Sherman’s Union forces invaded the state early in 1865. It was presumed by the defenders of Fayetteville that Sherman and his men would follow the Cape Fear River and attack the city from the north. Sherman, however, entered the city from the southwest, and the breastworks were never used. Although considered a noncontributing resource for this nomination, the Confederate breastworks were listed in the National Register of Historic Places in 1981. Today the breastworks are delineated by a historic marker near the entrance of the hospital from Ramsey Street.

When it was learned in 1938 the VA intended to build a new veterans hospital in North Carolina, over thirty cities competed to host the new facility. In Fayetteville, a committee of local citizens and members of the Chamber of Commerce appointed themselves to the task of making the case for Fayetteville. On July 7, 1938, it was announced that the new hospital would indeed be constructed in Fayetteville, and in October the Federal Board of Hospitalization passed a resolution that recommended to the president that General Hines, Administrator of the VA, be authorized to specifically accept the 145-acre “Myrtle Hill” site. Soon after, Alexander Cook, probably acting on behalf of the local committee, purchased the 145-acre tract in December 1938. Over two weeks later, on December 31, 1938, he donated it to the U.S. government.

The Fayetteville VA Hospital was originally planned and constructed as a general medical and surgical hospital. The buildings of the Fayetteville (NC) VA Hospital Historic District, constructed during the period of significance (1939–1950), appear to have been designed and have had construction overseen by the Veterans Administration’s Construction Service. As such, plans for the facility called for construction of the main building (Resource 1, 1939) and the flag pole (Resource 14, 1939) at the end of the main entrance drive (Resource E). To increase patient capacity an extension was constructed on the northeast elevation of the main building (Resource 1) circa 1947. One characteristic common to general medical and surgical Second Generation Veterans Hospitals constructed from the late 1920s to 1950 (also referred to as Period II) is a physical separation of buildings by general purpose. The administration and patient care buildings were located in the central core area of buildings. The residential areas were set apart at some distance from the central buildings to afford the resident staff privacy while providing ready access to the hospital and its support facilities. The maintenance/utility areas were constructed to the rear of the central core, or were otherwise sited in an area that was efficient yet unobtrusive. The Fayetteville VA Hospital Historic District displays these spatial relationships.

3 “Veterans Facility is Dedicated,” Fayetteville Observer, October 17, 1940: 1
4 United States Department of Veterans Affairs, files of the Facilities Management Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.
6 United States Department of Veterans Affairs, files of the Facilities Management Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.
The Fayetteville VA Hospital Historic District has buildings arranged in three clusters according to function: the central core, the residential quarters, and the maintenance/utility area. The central core consists of the buildings dealing directly with patients and administrative offices. This area contains the main building/outpatient clinic (Resource 1, 1939); service building (Resource 3, 1939); attendants’ quarters (Resource 8, 1939); and the flag pole (Resource 14, 1939). The attendants’ quarters (Resource 8, 1939) is separated from the main group of residential quarters. All of these resources are oriented to the northwest. The Fayetteville (NC) VA Hospital Historic District’s main building (Resource 1, 1939) and the flag pole (Resource 14, 1939) continue to serve as the focal points of the historic district.

A hierarchy of building ornamentation was developed for Period II Second Generation Veterans Hospitals according to the building’s public use and visibility; the main building displays the most ornamentation of all the historic district buildings (Resource 1, 1939), including a six-story central pavilion with a hip roof surmounted by a cupola. The fifth and sixth levels of the central pavilion were modeled after the architecture of the old Market House located in downtown Fayetteville. This is an example of the VA adapting a standardized building plan to include local historical or cultural precedents. Other examples of this include the use of Egyptian Revival details at the Marion, Illinois, VA hospital; the use of a portico at the Murfreesboro, Tennessee, VA hospital that mimics the portico of the Hermitage, the former residence of President Andrew Jackson; and Spanish Colonial details employed at Bay Pines, Florida. By comparison, buildings in the residential and maintenance/utility groups within the Fayetteville VA Hospital Historic District typically exhibit minimal or no ornamentation. The five-story, “H”-shape main building exhibits characteristics of the Classical Revival architectural style that was nationally popular during the period. No other patient care buildings were apparently planned for the Fayetteville facility, as subsequent site plans (1940 and 1952) do not include proposals for any such buildings within the period of significance, beyond the addition constructed on the northeast elevation of the main building (Resource 1) circa 1947. Smaller structures and buildings have been built after the period of significance, including the security pavilion (Resource 12, 2003), electrical distribution structure (Resource 37, 1977), and the computer building (Resource 21, 1986). Smaller smoking shelters and gazebos have also been constructed within the group. The largest addition to the central core is the outpatient clinic, which was constructed after the period of significance along the southwest elevation of the main building (Resource 1) in 1988. The footprint of the service building (Resource 3, 1939) has also been increased by an addition after the period of significance.

The residential quarters are composed of the nurses’ quarters, a duplex quarters, and manager’s quarters (Resources 4, 5, and 7, all 1939). A second duplex quarters (visible as “Building 6” on the 1939 site plan) was never constructed. The residences are located northeast of the central buildings within the Fayetteville VA Hospital Historic District and utilize minimal ornamentation to convey their Colonial Revival architectural style. The manager’s residence (Resource 7, 1939) is a detached, single-family residence exhibiting a symmetrical facade, cornice returns, modillions, and a wood door surround with pilasters, a broken pediment, and pineapple finial. The duplex quarters (Resource 5, 1939) exhibit similarly restrained decoration, while the nurses’ quarters (Resource 4, 1939) has a symmetrical facade, stone water table, and brick quoins. Also located within the quarters group is Resource 6, a modular building constructed in 2004 that houses offices for the human resources department. Two other modular buildings (Resources 41-T and 42-T, both dating to 2000) are located near the north boundary of the historic district to the northwest of Resource 7, the manager’s quarters.

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7 United States Department of Veterans Affairs, files of the Public Affairs Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.
8 United States Department of Veterans Affairs, files of the Facilities Management Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.
Buildings dating to the period of significance within the utility/maintenance area are concentrated southeast of the main building/outpatient clinic (Resource 1, 1939) and south-southwest of a deep ravine around which many of the facility’s buildings have been constructed. These buildings, which include the garage and chiller plant addition, cooling tower, and the boiler house on the northeast side of this group, and the laundry (Resource 10, 1939) on the southwest side of the group, are oriented southwest–northeast. Until the construction of parking lots in the 1950s to the southwest of the maintenance/utility buildings, this area was probably not normally viewed by the public. A secondary entrance from Facility Drive was probably constructed in conjunction with the 1950s parking lots or the later clinic addition.

Buildings and additions continued to be constructed within the historic district after the period of significance. These include additions such as the outpatient clinic constructed in 1988 onto the southwest elevation of the main building (Resource 1, 1939). New buildings were also constructed, such as the computer and electrical distribution buildings (Resources 21, 1986; and 37, 1977). Large parking lots have been constructed within the historic district after the period of significance, particularly west of the residential group and southwest of the main building/outpatient clinic (Resource 1, 1939). Some structures and buildings dating to the period of significance have been removed; the boiler house chimney and water tank were removed after being partially destroyed by a tornado in 1971. The chimney was originally designated as “Building 12.” The number was later reassigned to the security pavilion constructed in 2003 along the entrance drive (Resource E).

The VA originally owned 145 acres at the Fayetteville site, suggesting there was plenty of room for future growth. Some of that, however, is a deep ravine, and another section is located in the swampy lowlands near the Cape Fear River, east-northeast of the hospital proper. As with many Second Generation Veterans Hospitals, the General Services Administration (GSA) declared some of the land as surplus. To that end, approximately 58 acres was transferred from the federal government to Cumberland County, North Carolina, circa 1955, forming the basis of the present J. Bayard Clark Park and Nature Center. An additional 8 acres for the park were transferred to the City of Fayetteville in 1984. In 1995, acreage was transferred to the State of North Carolina for the construction of the state veterans home, located east-northeast of the Fayetteville VA Hospital Historic District. The medical center currently owns approximately 58 acres, and the historic district is comprised of approximately 32 acres.

Although large portions of the historic district’s landscape are developed with buildings and parking lots, considerable amounts of open space remain. Landscape characteristics include woodlands within the historic district composed of mature stands of pine and deciduous trees. The developed portion of the historic district features design elements of Period II general medical and surgical veterans hospitals, including a dense concentration of buildings, linear and curvilinear drives, and a short, linear formal entrance drive. An exercise trail is located in the wooded area northeast of the main entrance drive (Resource E) and southwest of the parking lot to the west of Resources 4 and 5, the nurses’ quarters and duplex quarters (both 1939). A recreation area with benches, picnic tables, and a basketball court is located in the wooded area to the north-northeast of Resource 41, a pavilion (1978), and southwest of the main entrance drive (Resource E). The residential buildings are located along a slightly curving drive with a secondary lane that provides access to the rear of the buildings. These quarters have mature trees and lawns but little other landscaping.

Today, the area surrounding the Fayetteville (NC) VA Hospital Historic District is used for community

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9 United States Department of Veterans Affairs, files of the Public Affairs Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.
10 United States Department of Veterans Affairs, files of the Public Affairs Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.
(educational and recreational) and residential purposes. Residences have been constructed along the south side of Facility Drive and along the north side of Cochran Avenue. The North Carolina State Veterans Home has been constructed east-northeast of the medical center property. The Clark Park and Nature Center is located east of the North Carolina Veterans Home and the Fayetteville Veterans Affairs Medical Center property.

**Individual Resource Inventory**

The dates of construction and details regarding the former use of the following resources are from the Determination of Eligibility dated 1980 and from information provided by the medical center’s Facilities Management Office. Information on the current uses of the resources was provided by the Facilities Management Office of the Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina. The numerical designations of the resources were assigned at the time of their construction by the VA. The “circa” dates of construction and letter designations were provided by the authors of this nomination for resources without construction dates or numerical labels. All resources that were present during the period of significance and retain integrity are considered contributing resources.

Minor resources that are not substantial in size and scale were not included in the resource count. Resources that were not designated in the resource count include prefabricated smoking shelters, small memorials, a small gas meter building, and benches.

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

<table>
<thead>
<tr>
<th>Resource #</th>
<th>Date of Construction</th>
<th>Contributing (C) /Noncontributing (NC)</th>
<th>Historic or Current Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1939</td>
<td>C</td>
<td>Main Building</td>
</tr>
<tr>
<td>3</td>
<td>1939</td>
<td>C</td>
<td>Service Building</td>
</tr>
<tr>
<td>4</td>
<td>1939</td>
<td>C</td>
<td>Nurses' Quarters</td>
</tr>
<tr>
<td>5</td>
<td>1939</td>
<td>C</td>
<td>Duplex Quarters</td>
</tr>
<tr>
<td>6</td>
<td>2004</td>
<td>NC</td>
<td>Human Resources Building</td>
</tr>
<tr>
<td>7</td>
<td>1939</td>
<td>C</td>
<td>Manager’s Quarters</td>
</tr>
<tr>
<td>8</td>
<td>1939</td>
<td>C</td>
<td>Attendants’ Quarters</td>
</tr>
<tr>
<td>9 and 35</td>
<td>1939 and 1974</td>
<td>NC</td>
<td>Garage and Chiller Building Addition</td>
</tr>
<tr>
<td>10</td>
<td>1939</td>
<td>C</td>
<td>Laundry Building</td>
</tr>
<tr>
<td>11</td>
<td>1939</td>
<td>C</td>
<td>Boiler House</td>
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<tr>
<td>12</td>
<td>2003</td>
<td>NC</td>
<td>Security Pavilion</td>
</tr>
<tr>
<td>14</td>
<td>1939</td>
<td>C</td>
<td>Flag pole</td>
</tr>
</tbody>
</table>


12 United States Department of Veterans Affairs, files of the Facilities Management Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.

Resource 1 was constructed as the main hospital building in 1939, and along with the flag pole (Resource 14, 1939), it remains the focal point of the Fayetteville (NC) VA Hospital Historic District. The main building is oriented to the northwest and is located in the central core group of buildings. It was constructed in a Colonial Revival style and includes Classical Revival architectural decorative details, such as stone pilasters, keystones, window lintels and sills, belt courses, window surrounds, panels, and elements including corbels, finials, and swag designs. The five-story, multiple-bay building is double “H”-shaped due to the construction of the four-story return wings and extension on the northeast elevation circa 1947. The original facade portion of the building was comprised of seventeen bays. Resource 1 displays a five-course common-bond brick exterior, and the raised basement is clad in cut stone. Stone belt courses between the first and second and fourth and fifth floors encompass the building. The facade of the building exhibits a central, projecting, six-story, three-bay entrance pavilion with a hip roof surmounted by a cupola.

The first-floor three-bay portico is constructed of cut stone. The arched bays are delineated by four pilasters with a corbel and double swag detail above. A cornice with dentils is surmounted by four urn-shaped finials. The central double-leaf entry is filled with two-light brass doors and a fanlight. The entry is flanked by arched windows filled with multiple-light, double-hung sashes. The raised basement and interior of the portico are clad in cut stone. The entry is accessed by two sets of granite stairs with stone railings. The three bays of the second, third, and fourth floors are filled with one-over-one-light, hopper-style replacement sashes. Nearly all the windows throughout the rest of the building have been filled with similar replacement sashes. Three stone panels with swag details are located between the third- and fourth-floor windows.

The fifth and sixth floors of the entrance pavilion were modeled after the central pavilion of Fayetteville’s Old Market House, located in the center of downtown Fayetteville. On the fifth floor, three bays filled with single-light, fixed replacement sashes are recessed behind a shallow loggia formed by the arched openings, which are similar to those that make up the open arcade of the original Old Market House. As with the original, a large, semi-circular central arch is flanked by two more narrow lancet arches. Iron railings are visible in each archway. The sixth floor of the pavilion has three bays delineated by pilasters with Ionic capitals. The arched windows are filled with multiple-light, fixed replacement sashes. The roof of the central entrance pavilion is surmounted by a square drum, and each face of the drum is framed by pilasters with Ionic capitals. The facade elevation of the drum features a clock face with Roman numerals. The other elevations have glazed oculi. The drum is surmounted by an octagonal cupola that features pilasters, louvered vents, a ball finial, lightning rod, and arrow-shaped
The main block of the facade flanking the central pavilion is composed of five floors. The three-bay rear and facade return wings have gable roofs. The three bays of the first-floor facade return wings feature stone window surrounds. The central bays of the second through fifth floors on the facade and rear return wings feature narrow, three-part windows. The bays of the fifth floor of the facade and rear return wings feature stone window surrounds, which incorporate the stone surrounds of the gable vents and feature scrolls flanking the vents.

A four-story addition was constructed on a slight projection of the northeast elevation of the main building (Resource 1) circa 1947. This was a sympathetic addition in that it employed many of the same architectural details as the original building. The three-bay facade and rear return wings and projecting extension include such features as a raised basement clad in cut stone, the continuation of the stone belt course between the first and second floors, stone keystones, and window and gable vent surrounds that include details such as scrolled brackets and swags.

On the northeast elevation of the 1947 addition a central entry at the basement level features a stone surround with pilasters that supports a cornice with dentils and is surmounted by a small panel with a swag detail, flanked by two small urns. Today, the entry is sheltered by a contemporary covered walkway into the geriatric park (Resource C) on the northeast side of the main building (Resource 1). The entry has been modified: originally a small vestibule, the exterior door was removed entirely. The surviving single-leaf entry is now filled with a nine-light, metal, automatic replacement door, but the original sidelights and transom have been retained.

It appears that a two-story (with basement), flat-roofed, three-bay addition was constructed sometime prior to 1952 onto the southeast elevation of the rear return wing of the 1947 addition. The addition continues to use the same architectural details (stone cladding, keystones, and belt course) employed in the 1947 addition. The addition clearly makes this wing longer than the others and is slightly narrower than the 1947 rear return wing. The rear return wing of the 1947 addition has a gable with a pediment and four bays.

The rear central wing features three bays filled with multiple-light arched sashes on the sixth floor similar to those on the facade elevation of the sixth floor. The wing then decreases to three stories with a raised basement. The three-story connecting corridor between the main building (Resource 1) and the service building (Resource 3, 1939) enters the central bay of the southeast elevation of the rear wing of Resource 1. Gabled dormers with arched windows are located at regular intervals along the roof of both the 1939 and 1947 sections of the main building (Resource 1). Some are filled with replacement sashes, but many are filled with louvered vents. The 1939 and 1947 sections of the main building (Resource 1) have gable roofs sheathed in slate tiles, and they are supported by a concrete basement foundation.

The two-story over raised basement outpatient clinic addition was constructed on the south elevation of the main building in 1988. This multiple-bay section of the building exhibits a raised basement clad in concrete and a running-bond brick exterior on the first and second floors. The clinic has two double-leaf entries into the basement level: one on the southeast elevation, and the other on the southwest elevation. Both entries have concrete surrounds and are filled with automatic, horizontal-sliding aluminum-framed glass doors with sidelights and transoms. The entries are sheltered by arched plastic canopies supported by and cantilevered from rectangular

14 United States Department of Veterans Affairs, files of the Facilities Management Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.
15 United States Department of Veterans Affairs, files of the Public Affairs Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.
concrete columns. The basement window bays are filled with single or ribbons of three single-light, fixed sashes. The windows are filled with one-over-one light, hopper- or awning-style sashes similar to those found in the 1939 and 1947 sections of the main building (Resource 1) and have precast-concrete surrounds. The exterior has no other ornamentation other than double-soldier and soldier-rowlock courses of brick. The concrete door surrounds and basement cladding are treated to approximate cut stone. The outpatient clinic section of the main building has a flat roof and is supported by a concrete foundation.

On the northwest elevation of the clinic addition, a basement-level addition has been constructed, partially below grade. It features a running-bond brick exterior and displays a rusticated concrete block belt course and foundation details. A large, bowed window with multiple-light, fixed sashes dominates the northwest elevation of the addition. Ribbons of windows filled with single-light, fixed sashes are located at regular intervals along this elevation. A single-leaf entry filled with an aluminum-framed glass door with transom and sidelights is located to the left of the large, bowed window. A double-leaf entry filled with metal doors is found near the northwest corner. This addition to the outpatient clinic has a flat roof and is supported by a concrete foundation.

The outpatient clinic additions along the southwest elevation of the main building (Resource 1) substantially increase the footprint of the building. The additions are sympathetically constructed along the right side elevation of the 1939 section of the building. The addition is only two stories (fully exposed basement level and first floor level) adjacent to the original portion of the main building, when looking toward the facade. A two-story glass connector (resting on the fully exposed basement level) connects the three story portion of the outpatient clinic addition (basement level and upper two floors) of the addition to the southwest elevation of the original portion of the main building. The outpatient additions do not overwhelm the original portion of the main building, and the additions’ massing, materials, and flat roof clearly indicate their construction in the late twentieth century. Therefore, even with the modifications to the main building, it continues to retain integrity to contribute to the historic district.


Resource 3 was constructed as the service building (containing kitchen, dining, recreation, and warehouse functions) in 1939, and currently it retains these uses. It is oriented to the northwest and is located in the central core group of buildings, immediately east of the main building (Resource 1, 1939). The service building (Resource 3) is constructed in a utilitarian style and includes none of the Classical Revival architectural decorative details found on the main building (Resource 1). The four-story, multiple-bay building was originally “T”-shaped; however, the construction of a basement-level addition on the southwest elevation has created a somewhat rectangular building footprint. Resource 3 displays a five-course common-bond brick exterior. A soldier belt course encompasses the building above the fourth-floor windows. The facade of the building exhibits a central, projecting, two-bay entrance pavilion. The connecting corridor (Resource D) from the main building (Resource 1) enters the building in the center of the projection. The windows throughout the building are filled with one-over-one-light, hopper-style replacement sashes similar to those found on the main building (Resource 1). The location of the auditorium is indicated by the presence of arched windows filled with similar replacement sashes along the third floor of the service building.

Near the southwest corner of the 1939 section of the service building (Resource 3), a two-story stair tower has been constructed for egress, probably for the auditorium space. The warehouse addition constructed at the basement level of the southwest elevation has a running bond brick exterior and exhibits a stone belt course that encompasses this section of the building. The southwest corner of the addition is truncated, probably to provide better access into the courtyard formed by the main and service buildings (Resources 1 and 3). Two small openings on the southwest elevation are filled with louvered vents. The southeast elevation of the addition has a
concrete block exterior, four garage bays filled with overhead metal doors, and a single-leaf entry filled with a metal door. The single-leaf entry and two of the garage bays are sheltered by roofs supported by round steel columns. There is evidence today on the southeast elevation of the four-story section of the building that a fire exit from the auditorium was removed for the construction of the warehouse addition.

The southeast (rear) wing of the service building (Resource 3) decreases from four to two stories. The basement level includes loading docks and service entries, and the original kitchen space is indicated by the taller roof and paired windows on the second floor of the rear wing. A projection in the southeast corner of the wing is probably a stairway tower. On the northeast elevation, several former windows have been filled in by brick. A large stair tower has been constructed but is not attached to the building, except by a covered walkway that extends from the roof. The covered walkway from the auditorium was once attached to this walkway, providing a means of egress from the auditorium in case of an emergency. The tower is pierced by numerous louvered vents and a single-leaf entry filled with a metal door at the basement level. A small rectangular addition has been constructed on the basement level near the northwest corner of the service building (Resource 3). It may house an emergency generator. It has several bays filled with louvered vents and a single-leaf entry filled with a metal door. Resource 3 has a flat roof and is supported by a concrete basement foundation.

Although the service building (Resource 3) has been negatively impacted by the construction of the basement-level addition on the southwest elevation, by the enclosed window openings, and by the installation of replacement window sashes, the building retains its overall fenestration pattern and general massing. The connecting corridor (Resource D) and the front elevation of the building have not been enveloped by a larger connecting structure between the two buildings. The spatial relationships between the service building (Resource 3) and the main building (Resource 1), and the maintenance/utility buildings located southeast of the service building are still relatively intact.


Resource 4 was constructed as the nurses’ quarters in 1939, and today it is used for administrative offices. It is oriented to the northwest and is located in the residential group of buildings, north-northeast of the main building (Resource 1, 1939). The nurses’ quarters (Resource 4) is constructed in the Colonial Revival-style and features Classical Revival architectural decorative details, such as a generally symmetrical facade, a cornice with dentils, a stone water table, and brick quoins. The two-story, eleven-bay (w/w/w/d/w/w/w/w/w), rectangular building with a seven-bay central projection, displays a five-course common-bond brick exterior. The single-leaf entry is filled with a recessed-panel wood door, sidelights, and fanlight transom. The entry is accessed by concrete stairs with iron railings and is sheltered by a square porch with a flat roof. The porch is supported by a pair of square pilasters and three Tuscan columns in the opposite corners. The porch roof has a wide cornice with modillions and is surmounted by a balustrade. The windows throughout the building are filled with one-over-one-light, hopper-style replacement sashes similar to those found on the main building (Resource 1, 1939).

The three-bay southwest and northeast (side) elevations each exhibit former porches off the first floor. Originally open arches, today the porches have been enclosed with frame walls and vertical wood exteriors. The central bay of the former porch on the southwest elevation has a single-leaf entry filled with a contemporary recessed-panel door. The entry is accessed by a concrete ramp and a set of concrete stairs. Windows are centered within the other bays of the former porch. The former porch is surmounted by the original brick and iron railing balustrade. The former porch on the northeast elevation has similarly been enclosed. The central bay of the second floor has been resized for a single-leaf entry, which is filled with a metal door. A set of steel stairs ascends to the roof of the former porch, and one section of the balustrade has been removed to provide access to the stairway, which, along with the walkway from the door, is sheltered by a ribbed metal roof.
The southeast (rear) elevation is very similar to the facade, as it exhibits eleven-bays (w/w/w/w/d/w/w/w/w/w), including a seven-bay central projection. The rear elevation also features a central, single-leaf entry filled with a metal door. The entry has a door surround with pilasters and a triangular pediment with dentils. Three gabled dormers are located on the facade and rear elevation roof slopes, and single gabled dormers are on the side elevation roof slopes. The arched windows are filled with replacement sashes or louvered vents. The nurses’ quarters (Resource 4) has a hip roof sheathed in slate tiles and is supported by a concrete basement foundation.


Resource 5 was constructed as duplex quarters for the medical staff in 1939, and today it is used for administrative offices. It is oriented to the northwest and is located in the residential group of buildings, south of the human resources building (Resource 6, 2004). The duplex quarters (Resource 5) is constructed in the Colonial Revival-style and features architectural decorative details such as a symmetrical facade, a simple brick cornice, cornice returns, and small entrance vestibules with pedimented gables and fluted pilasters. The two-story, six-bay (w/d/w/w/d/w) rectangular building displays a five-course common-bond brick exterior. The facade of the building exhibits two projecting, single-bay entrance vestibules. Each of the single-leaf entries are filled with a panel wood door, transom, and a six-light wood storm door. The entry is accessed by concrete stairs with iron railings. The windows flanking the facade entries are filled with one-over-one-light, hopper-style replacement sashes similar to those found on the main building (Resource 1, 1939) and wood panels. The panels, located below the sashes, feature two rectangular-shaped details created with applied moldings. The other windows throughout the building, except for two on the rear elevation, are filled with similar replacement sashes but do not have the panels.

The north and south elevations of the building each feature former side porches that were enclosed in 1978. Frame walls have been constructed between the square, chamfered wood roof supports. Windows filled with sashes identical to the rest of the building have been centered in the facade and rear elevations of the former porches, and pairs of windows have been centered within the central bay of the side elevations. The shed roofs of the porches are sheathed in slate tiles. The exterior chimneys, visible above the porch roofs, pierce the roof at the gable ends and are flanked by windows on the second floor and two rectangular louvered attic vents. A central, interior chimney pierces the roof at the ridgeline.

The eight-bay (w/d/w/w/w/d/w/d) rear elevation features a central, rear projection with two gables. Flanking the projection and recessed from it are two single-leaf rear entries filled with nine-light wood doors and a six-light wood storm door similar to those on the facade elevation. The entries are sheltered by small porches with shed roofs sheathed in slate tiles, supported by square wood posts. The entries are accessed by a combination of late-twentieth-century concrete ramps and stairs with metal railings. Two ground floor windows in the rear projection are filled with single-light, fixed replacement sashes. A louvered vent is located in each of the rear projection’s gables. Resource 5 has a gable roof sheathed in slate tiles and is supported by a concrete basement foundation.


Resource 6 was constructed in 2004 as the human resources building, and it retains that use today. It is oriented to the west and is located north of the duplex quarters (Resource 5, 1939). Site plans of the facility dating to 1939 indicate a duplex quarters was to be constructed in this location sometime after the initial construction of

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16 United States Department of Veterans Affairs, files of the Facilities Management Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.
the hospital, but it was never built.\textsuperscript{17} The human resources building (Resource 6) is a modular building constructed in no discernible architectural style. The single-story, five-bay (w/w/d/w/w) building is “U”-shaped, formed by two rear wings that project at right angles from the facade section of the building. The single-leaf facade entry is filled with a metal door, and is accessed by brick stairs and a concrete porch with metal railings. Resource 6 has an exterior clad in sheets of cement-fiberboard. The windows flanking the facade entries are filled with six-over-six-light, double-hung sashes. The other windows throughout the building are filled with similar sashes. A ribbed-metal cornice encompasses the building.

The south elevation has seven windows, and the north elevation has seven windows and a single-leaf entry near the northeast corner filled with a metal door and accessed by brick stairs and a concrete porch with metal railings. The east (rear) elevation features an interior courtyard formed by the two rear wings. The three-bay wing on the left features a central single-leaf entry flanked by two windows, while the wing on the right has two windows. Inside the courtyard a central, double-leaf entry into the facade section of the building, located at the far end of the courtyard, is filled with multiple-light French doors. This central entry is accessed by brick stairs and a concrete ramp leading to a porch with metal railings. Resource 6 has a flat roof, and the foundation is hidden by brick skirting.


Resource 7 was constructed as the manager’s quarters in 1939, and today it is used for administrative offices. It is oriented to the southwest and is located in the residential group of buildings, north of the human resources building (Resource 6, 2004). The manager’s quarters (Resource 7) is constructed in the Colonial Revival-style and features architectural decorative details such as a symmetrical facade, a simple brick cornice, cornice returns, and a small entrance vestibule with a pedimented gable and pilasters. The two-story, three-bay (w/d/w) rectangular building displays a five-course common-bond brick exterior. The facade of the building exhibits a projecting, single-bay entrance vestibule. The single-leaf entry is filled with a six-light wood storm door and a transom. A nine-light wood door inside the vestibule is visible through the storm door. The entry is accessed by concrete stairs with metal railings. The windows flanking the facade entry are filled with eight-over-twelve-light, double-hung sashes and wood panels. The panels, located below the sashes, feature two rectangular-shaped details created with applied moldings. The other windows throughout the building are filled with similar multiple-light sashes but do not have the panels. The window sashes throughout the majority of the building appear to be original to the manager’s quarters (Resource 7).

The three-bay southeast elevation features basement windows filled with three-light, hopper-style sashes, and multiple-light, double-hung sashes. A rectangular louvered vent pierces the gable. The northwest elevation has a former porch, which, like those on the duplex quarters (Resource 5, 1939), was enclosed in 1978.\textsuperscript{18} The former porch has windows with multiple-light, double hung sashes centered within the bays of the former porch. The former porch has a shed roof sheathed in slate tiles. An exterior chimney on this elevation pierces the roof at the gable end. It is flanked by two windows on the second floor and two quarter round windows in the gable.

The northeast (rear) elevation features a three-bay (d/w/w), gable-roof projection. The single-leaf rear entry is filled with a nine-light wood door and a six-light wood storm door, sheltered by a small porch with a shed roof and wood supports. The entry is accessed by brick stairs, concrete ramp and porch with metal railings. The gable features a louvered vent. To the right of the rear projection, in the corner formed by the projection and the main

\textsuperscript{17} Ibid.

\textsuperscript{18} United States Department of Veterans Affairs, files of the Facilities Management Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.
block of the building, a set of concrete stairs descends to a single-leaf entry into the basement. The entry is filled with a nine-light wood door and a six-light wood storm door. The entry is sheltered by a porch with a shed roof, supported by a square wood post. Resource 7 has a gable roof sheathed in slate tiles and is supported by a concrete basement foundation.


Resource 8 was constructed as the attendants’ quarters in 1939, and today it is used for administrative offices. It is oriented to the northwest and is located southeast of the outpatient clinic section of the main building (Resource 1). The attendants’ quarters (Resource 8) is constructed in the Colonial Revival-style and features decorative details such as a symmetrical facade, a cornice with dentils, cornice returns, a stone water table, and brick quoins. The two-story, seven-bay (w/w/w/d/w/w/w), side-gable, rectangular building displays a five-course common-bond brick exterior. The centered single-leaf entry is filled with a commercial aluminum-framed glass door. The former transom has been enclosed. The entry is accessed by concrete stairs and a concrete ramp with metal railings and is sheltered by a square porch with a flat roof, which is supported by square pilasters and two Tuscan columns in the opposite corners. The porch roof has a cornice with dentils. The windows throughout the building are filled with one-over-one-light, hopper-style replacement sashes similar to those found on the main building (Resource 1, 1939).

The three-bay northeast and southwest (side) elevations feature arched windows in the gables filled with replacement sashes. The southeast (rear) elevation has a central single-leaf entry featuring a wood door surround with pilasters and a pediment with dentils. The entry is filled by a metal door. To the left of this entry a set of concrete stairs descends to a single-leaf entry into the basement. The entry is filled with a nine-light wood door. Three dormers with hip roofs are located at regular intervals on the facade and rear roof slopes. The dormers are filled with single-light, fixed sashes or louvered vents. Resource 8 has a gable roof sheathed in slate tiles and is supported by a concrete basement foundation.


Resource 9 was constructed as the garage in 1939, and it retains a similar use today. It is oriented to the southwest and is located in the maintenance/utility group of buildings, north of the laundry building (Resource 10, 1939). The garage (Resource 9) is constructed with none of the Colonial Revival architectural decorative details found on the main building (Resource 1, 1939) or residential group of buildings also constructed in 1939. The single-story, eight-bay, side-gable, rectangular building displays a five-course common-bond brick exterior. Originally the facade elevation had nine garage bays but one has been enclosed, and a flat-roof frame addition has enclosed the others. Currently the facade’s flat-roof addition has three single-leaf entries filled with metal doors, and five garage bays filled with overhead metal doors.

The northwest gable-end elevation exhibits a single-leaf entry and four windows. The entry is filled with a single-light metal door, and the windows are filled with multiple-light, awning-style sashes. Similar windows are found along the rear elevation of the building. The southeast elevation has an addition that extends to the chiller building addition (Resource 35, 1974), but a rectangular louvered vent is visible in the gable end of Resource 9. The rear (northeast) elevation has twelve windows. One former window appears to have been filled with air ducts, and some sashes have been removed for vents, fans, and air conditioners. Three circular vents pierce the ridgeline of the roof at regular intervals. Resource 9 has a gable roof sheathed in slate tiles and is supported by a concrete foundation.

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Fayetteville Veterans Administration Hospital Historic District
Name of Property
Cumberland County, North Carolina
County and State
U.S. Second Generation Veterans Hospital
Name of multiple listing (if applicable)

Resource 35 was constructed in 1974 as the chiller (air conditioning) building addition. It is unclear when the single-story, three-bay (d/w/w), flat-roof addition between the garage and the chiller building addition (Resource 9 and 35) was constructed, although it appears it could have been built at the same time as the chiller building addition. This connecting section of the chiller building addition extends from the southeast elevation of the garage. The connecting addition is clad in brick laid in a five-course common bond, similar to that of the garage building. The double-leaf entry of the three-bay addition is filled with two metal doors, while to the right of the entry are two windows filled with single-over-single, awning-style sashes. The rear elevation has three bays: two windows filled with single-over-single-light sashes and a single-leaf entry with a single-light metal door. The single-story, four-bay chiller building addition has a running-bond brick exterior. The addition’s facade has a single double-leaf entry filled with metal doors. This entry provides access to the building itself. Three large louvered vents are visible to the right of the entry into the chiller building addition. A single-leaf entry filled with a metal door on the southeast elevation provides access to the cooling tower (Resource 36, 1974), located southeast of the chiller building addition (Resource 35). Three paired windows filled with multiple-light, awning-style sashes are visible on the northeast (rear) elevation of the addition. Resource 35 (1974) has a flat roof and is supported by a concrete foundation.

The garage and chiller building addition do not contribute to the historic district because of alterations to the resource. The facade of the original portion of the garage (Resource 9) has been modified though the addition of the flat-roof, frame addition with garage bays. This addition, while not extending to the soffit of the façade, obscures the majority of the garage’s original façade wall plane. The chiller building and connecting addition are shorter and smaller in massing than the garage building, but greatly add to the overall footprint of the resource. While the brick exterior of the addition compliments the original materials of the garage, the massing and design of the addition indicates its construction in the latter portion of the twentieth century. Therefore the garage/chiller building addition does not retain sufficient integrity to contribute to the Fayetteville (NC) VA Hospital Historic District.


Resource 10 was constructed as the laundry building in 1939, and today it appears to be used for storage. It is oriented to the northeast and is located south of the garage (Resource 9, 1939). The laundry building (Resource 10) is constructed in a Colonial Revival-style but features almost none of the architectural decorative details found on the main building (Resource 1, 1939) or residential group of buildings constructed in 1939. The single-story, nine-bay, rectangular building displays a five-course common-bond brick exterior. It appears an addition was constructed on the southeast elevation of the building.20 This addition extends beyond the facade wall plane of the original portion of the building and slightly beyond the loading dock that extends nearly the length of the original portion of the building’s facade. Two double-leaf entries along the facade are filled by six-light metal doors and transoms. A former window appears to have been resized and filled with an overhead garage door. The windows are filled with multiple-light, awning-style sashes. Similar windows are found throughout the building. The entries and garage door are accessed by concrete stairs and a concrete loading dock along the northeast elevation of the 1939 section of the building. The loading dock is sheltered by porches with flat, metal roofs, supported by steel columns.

The two-bay southeast elevation has a single-leaf entry filled with a single-light metal door and a window. A set of concrete stairs located at the northeast corner of the building descends to a single-leaf entry into the basement. The stairs are surrounded by a chain-link fence. Louvered vents are visible in the gable end.

20 United States Department of Veterans Affairs, files of the Facilities Management Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.
twelve-bay southwest (rear) elevation is partially below grade. The northwest gable end exhibits three bays, all windows. A large louvered vent is visible in the gable end. Vents and air handling equipment pierce the roof. Resource 10 has a gable roof sheathed in slate tiles and is supported by a concrete basement foundation.


Resource 11 was constructed as the boiler house in 1939, and it retains that use today. It is oriented to the southwest and is located east of the laundry building (Resource 10, 1939). The boiler house (Resource 11) features few architectural decorative details. The four-bay rectangular building displays a five-course common-bond brick exterior with a soldier belt course that encompasses the building. Like other Second Generation Veterans Hospital boiler houses, the building exhibits two tiers of windows, but it is generally a single open space. The boiler house at the Fayetteville facility is built partially into the side of a hill.

Three windows filled with paired six-light, fixed sashes and a set of concrete stairs are visible from the facade elevation. The stairs descend to a single-leaf entry filled by a single-light metal door. A large louvered vent is visible above the door. The northwest elevation exhibits two windows filled with multiple-light, awning-style sashes at two levels. A single window below these may indicate the presence of a basement or sub-basement space. The northeast (rear) elevation features a single-story addition with a running-bond brick exterior at the basement level. The addition displays a double-entry filled with metal doors, a window filled with single-light, double-hung sashes, and large louvered vents.

Adjacent to the rear addition, near the northeast corner of the building, is a large garage bay filled by an overhead metal door, and a double-entry filled by single-light metal doors and a transom. The upper level of the building exhibits three large factory-style windows filled with multiple-light, awning sashes. Two tiers of two windows with single sashes are visible near the northwest corner. The southeast elevation displays three large factory-style windows filled with multiple-light, awning sashes. An addition, constructed on the facade elevation and under the parking area above, is accessed by a single-leaf entry filled with a metal door. Three large vent pipes with conical hoods and assorted smaller vents pierce the flat roof of Resource 11, which is supported by a concrete foundation.


Resource 12 is a small security pavilion or gatehouse constructed in 2003. It is oriented to the south, located in the central core group of buildings, south of the flag pole (Resource 14), on the south side of the median of the entrance drive (Resource E). The two-bay building has a single-leaf entry, filled with an aluminum-framed glass door, and a window filled with one-by-one, horizontally-sliding sashes. The running-bond brick knee-walls are surmounted by windows or paired windows filled with single-light, fixed sashes. The hip roof is sheathed in asphalt shingles. Resource 12 is supported by a concrete slab foundation.

**Resource 14. Flag pole. 1939. Contributing object.**

Resource 14 is the flag pole constructed in 1939. It is located due west of the main entrance to the 1939 section of the main building (Resource 1), in the center of the east end of the median formed by the entrance drive (Resource E). It features an octagonal concrete base with a concrete walk surrounding the base. Both the base and the steel pole are painted white. The pole is surmounted by a brass ball finial. The base is surrounded by a landscaped area, bordered by boxwood and other small deciduous bushes and other plants immediately around the base. Resource 14 is similar to examples of other Period II Second Generation Veterans Hospital flag poles.

Resource 20 is a storage building constructed in 1977. It is oriented to the northeast to the immediate east of the boiler house (Resource 11, 1939). This storage building (Resource 20) has two bays on the facade and rear elevation, which are single-leaf entries filled with metal doors and large louvered vents. The exterior is clad in ribbed metal. A large circular vent pierces the roof. Resource 20 has a slightly-pitched gable roof sheathed in ribbed metal and is supported by a concrete foundation.


Resource 21 was constructed in 1986 as the computer building. It is oriented to the southwest, immediately north/northwest of the service building (Resource 3, 1939). The computer building (Resource 21) is a single-story, rectangular building with a five-course, common-bond brick exterior. The facade elevation exhibits a three-bay projecting entrance pavilion. The single-leaf entry is filled with a single-light metal door, flanked by windows filled with one-over-one-light, hopper-style sashes similar to those found on the main building (Resource 1, 1939). Similar windows are found throughout the building. The southeast and northwest elevations each have a single-leaf entry filled with metal doors. A small projection on the northeast (rear) elevation has a shed roof sheathed in ribbed metal and exhibits double-leaf entries filled with metal doors on side elevations of the projection. Resource 21 has a hip roof sheathed in asphalt shingles and is supported by a concrete foundation.


Resource 36 is the cooling tower that was constructed as part of the air conditioning system in 1974. It is located immediately east of the chiller building (Resource 35, 1974). The tower itself is supported by steel piers or pilings, supported by a concrete slab and retaining wall built into the hill. Pipes connect the cooling tower to the chiller plant. It is surrounded by a chain link fence.


Resource 37 is an electrical distribution building that was constructed in 1977. It is located northwest of the computer building (Resource 21, 1986). The single-story building has a galvanized steel exterior. Single-leaf entries filled with metal doors and small louvered vents are located on the southeast and northwest elevations. Resource 37 has a flat roof and is supported by a steel I-beam foundation bolted to a concrete slab.


Resource 38 was constructed in 1991 as a shelter in the geriatric park (Resource C). It is oriented to the northeast and is located immediately north of the main building (Resource 1, 1939). The structure is a rectangular, open picnic shelter. On the southwest elevation the roof is supported by brick piers that project from a brick wall with an iron gate. Other roof supports are columns with Tuscan capitals. Trellis inserts are visible between the columns. A cornice with modillions encompasses the structure. A covered walkway with a flat roof connects the shelter to the entrance door in the northeast elevation of the main building (Resource 1, 1939). The walkway roof is supported by pairs of columns with Tuscan capitals and exhibits a cornice with modillions similar to that of the shelter. Resource 38 has a gable roof sheathed in asphalt shingles and is supported by a concrete slab foundation.


Resource 39 is a gazebo constructed in 1991 as part of the geriatric park (Resource C). It is located northeast of the park shelter (Resource 38). The octagonal structure is partially enclosed with balustrade railings. The octagonal roof is supported by columns with Tuscan capitals. A cornice with modillions, similar to that found on the park shelter (Resource 38), encompasses the structure. Resource 39 has an octagonal hip roof sheathed in
asphalt shingles, surmounted by a cupola and weathervane, and the structure is supported by a concrete slab foundation clad in brick veneer.


Resource 41 is an octagonal picnic shelter constructed in 1978. It is located west of the outpatient clinic section of the main building (Resource 1, 1939). The roof is supported by piers clad in panels of vertical wood siding. Resource 41 has an octagonal roof sheathed in asphalt shingles, and it is supported by a concrete slab foundation.


Resource 41-T was constructed in 2000 for administrative offices, and it retains that use today. It is oriented to the southeast, northwest of the manager’s quarters (Resource 7, 1939). Resource 41-T is a seven-bay (w/w/w/d/w/w/w), single-story modular building. It has a vertical wood paneling exterior. The single-leaf entry is filled by a metal door, accessed by metal stairs with a railing. The windows are filled with single-light, double-hung sashes. The northeast elevation exhibits a double-leaf entry filled with multiple-light French doors, flanked by a window and a single-leaf entry filled with a metal door. This entry is accessed by a metal ramp and stairs shared with the home-based primary care modular building (Resource 42-T, 2000). The rear elevation features a single-leaf entry filled with a metal door and four windows. Resource 41-T has a nearly flat roof, and the foundation is hidden by vinyl skirting.

**Resource 42-T. Home-Based Primary Care Modular Building. 2000. Noncontributing building.**

Resource 42-T was constructed in 2000 to house administrative and patient care offices, and it retains that use today. It is oriented to the southeast and is located northwest of the manager’s quarters (Resource 7, 1939). Resource 42-T is a single-bay, single-story modular building. It has a vertical wood paneling exterior. The double-leaf entry is filled with multiple-light French doors, accessed by a metal ramp and stairs shared with the administration modular building (Resource 41-T, 2000). The northeast elevation has two single-leaf entries filled with metal doors, and five windows filled with single-light, horizontal-sliding windows. Similar windows are found throughout the building. The southwest elevation features four windows. Resource 42-T has a slightly pitched roof, and the foundation is hidden by vinyl skirting.


Resource 44 is an electrical distribution building constructed in 2005. It is oriented to the south and located adjacent to the main building (Resource 1, 1939), south of the older electrical distribution building (Resource 37, 1977). The two-bay building is a pre-fabricated metal structure. Two single-leaf entries are filled with metal doors. Resource 44 has a flat roof, and the steel I-beam foundation is bolted to a concrete slab.


Resource A is the Confederate breastworks that were constructed in the closing days of the Civil War by the forces charged with the defense of Fayetteville during General William T. Sherman’s march north from South Carolina. The resource consists of a line of earthen fortifications that range in height from approximately one or two feet to six or more feet. The breastworks extend across the hospital property for over 1000 feet, with an approximately 150 foot extension at a right angle one end.21 A large portion of the breastworks are located within

the Fayetteville VA Hospital Historic District. At least two cuts may be observed along the breastworks for roads and sidewalks. The breastworks were previously listed (1981) in the National Register of Historic Places. The Confederate breastworks are a noncontributing site within the Fayetteville (NC) VA Hospital Historic District because it dates to prior to the period of significance. During the building of the hospital, the VA must have been aware of the importance of the breastworks, as a conscious effort appears to have been made to avoid them in the planning of the facility.


Resource B is a 40-foot carillon donated by American Veterans and constructed in 1993.\(^{22}\) It is located southwest of the outpatient clinic section of the main building (Resource 1, 1939). A rectangular box, with vertical vents, shelters the speakers of the carillon. The carillon is supported by four supports with three cross braces, anchored to a concrete slab foundation. Three bells of various sizes are visible on the exterior of the carillon. Three park benches are located around the base of the carillon, which is surrounded by a landscaped border. A small bronze plaque reads “AMVETS Dedicated This Carillon as a Living Memorial to America’s Veterans Who Served Their Country Honorably for the Cause of Freedom, VA Medical Center, Fayetteville, NC, April 17, 1993.”


Resource C is a small, enclosed park constructed in 1991 on the northeast side of the main building (Resource 1, 1939), between the main building and the nurses’ quarters (Resource 4, 1939). The park includes the park shelter (Resource 38) and the park gazebo (Resource 39), a small fountain, a street clock, curvilinear sidewalks, and landscaping. A time capsule is indicated to have been buried near the street clock in 1990.

**Resource D. Connecting Corridor. 1939. Contributing structure.**

Resource D is a connecting corridor between the main building (Resource 1, 1939) and the service building (Resource 3, 1939) constructed in 1939. The three-bay corridor features a five-course, common-bond brick exterior and a flat roof. Single-leaf entries are located on the northeast and southwest elevations at the basement level. The windows are filled with one-over-one, hopper-style replacement sashes similar to those on the main building (Resource 1) and other buildings within the historic district. A single-story, rectangular projection at the basement level was constructed on the northeast elevation of the connecting corridor (Resource D) to the left of the entry. It features a single-leaf entry filled with a metal door, and a five-course, common-bond brick exterior with a flat roof. Resource D is supported by a concrete foundation.

**Resource E. Entrance Drive. 1939. Contributing site.**

Resource E is the entrance drive from Ramsey Street, and was constructed in 1939. The entrance is oriented northwest–southeast, extending from Ramsey Street to the front of the main building (Resource 1). The drive features a landscaped median, with the flag pole (Resource 14, 1939) located at the southeastern end of the median, opposite the entrance to the main building (Resource 1). The security pavilion (Resource 12, 2003) is located south/southeast of the flag pole along the south side of the median. The drive originally extended north to the residential buildings and south to the southwest elevation of the main building (Resource 1) and then on to the original parking lot and the maintenance/utility buildings.\(^{23}\) The drive along the residential buildings has largely

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\(^{23}\) United States Department of Veterans Affairs, files of the Facilities Management Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.
been retained (with additional parking lots constructed west of the residences) and is also contributing to the historic district. This drive originally terminated in a circular drive to the northwest of the manager’s quarters (Resource 7, 1939). The drive to the south has been altered to accommodate the construction of the outpatient clinic section of the main building (Resource 1).


Resource F includes brick entrance signs and gate posts that were constructed circa 1990s. A two-part gatepost/sign flanks the entrance drive (Resource E). The sign on the left of the drive is oriented slightly northwest toward Ramsey Street; the sign on the right of the drive is oriented slightly southwest toward Ramsey Street. The lower section of each gatepost/sign includes two brick piers with a brick railing or balustrade between the piers. The taller sections are also two brick piers with a solid masonry wall upon which the signs hang. At the west end of the median is another sign, with two brick piers, a solid masonry wall, upon which the sign is attached.
Areas of Significance: Criterion A

Politics/Government

The Fayetteville VA Hospital Historic District is eligible under Criterion A at the state level of significance in the areas of Politics and Government because the selection of the site of the hospital was partially determined by the political influences exerted by the local community to acquire the federal hospital and its substantial contribution to the local and state economy during both construction and operation. When it was learned in 1938 the VA intended to build a new veterans hospital in North Carolina, over thirty cities competed to host the new facility. In Fayetteville a committee of local citizens and members of the Chamber of Commerce appointed themselves to the task of making the case for Fayetteville. Another factor that might possibly have influenced the decision of placing the hospital in Fayetteville was its proximity to Fort Bragg, a major Army training center. The delegation from the Fayetteville Chamber of Commerce and the efforts of many of its citizenry paid off when the VA announced on July 7, 1938, that the hospital would be built in Fayetteville.24 In October the Federal Board of Hospitalization passed a resolution that recommended to the president of the United States that General Frank Hines, Administrator of the VA, be authorized to specifically accept the 145-acre “Myrtle Hill” site.25 Soon after, Alexander Cook, probably acting on behalf of the local committee, purchased the 145-acre tract in December 1938. Over two weeks later, on December 31, 1938, he donated it to the U.S. Government.26

The general contract for construction of the hospital was awarded to a contracting company from Chicago in the amount of slightly over $1 million. Construction began in the Spring of 1939,27 and the facility was completed in the Fall of 1940, with the campus containing ten buildings.28 The total cost of these buildings and the fixed equipment contained therein was approximately $1.3 million.29 The original buildings were built according to standardized designs utilized at other VA hospitals, although variations in the designs of the buildings were common.30 In the case of the main building (Resource 1), elements of Fayetteville’s Old Market House were replicated in the hospital building’s central pavilion, including its cupola and arches.31

The Fayetteville VA Hospital was dedicated on October 17, 1940. Colonel George E. Ijams, assistant Administrator of Veterans Affairs, addressed the crowd as the keynote speaker. The regional offices of the VA, previously located in Charlotte, were moved to the Fayetteville VA Hospital campus. The combined facility

24 “Veterans Facility is Dedicated,” Fayetteville Observer, October 17, 1940: 1.
25 United States Department of Veterans Affairs, files of the Facilities Management Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.
28 “Site For New Hospital Was Picked in ’38,” Fayetteville Observer, October 17, 1940; “Uncle Sam Remembers Veterans of Wars,” unknown newspaper, April 12, 1942, located in the vertical files of the Cumberland County Public Library, Fayetteville, North Carolina.
29 “Handsome Unit Cost More Than Million Dollars,” Fayetteville Observer, October 17, 1940.
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Fayetteville Veterans Administration Hospital Historic District

Name of Property
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Name of multiple listing (if applicable)

included a 307-bed general medical and surgical hospital and regional offices. The regional offices of the VA were moved from Fayetteville to Winston-Salem in 1946. Also in 1946, President Harry S. Truman authorized an expansion of the hospital to accommodate veterans of World War II and aging World War I veterans. The addition, completed in 1947, increased the hospital’s capacity to 416 beds. The statewide level of significance for the Fayetteville VA Hospital Historic District is evidenced by its role as a regional medical center that provided general medical and surgical care. The regional identity of the Fayetteville VA Hospital Historic District is also evident in the design of the main building that utilized monumental, classical revival architectural detailing to create a local landmark. The hospital remained important to the state and local community throughout the period of significance, as the Fayetteville VA Hospital expanded to care for additional patients and continued to serve as an economic engine to the local economy.

Health/Medicine

The Fayetteville VA Hospital Historic District is eligible under Criterion A in the areas of Health and Medicine at the state level of significance because of the role the Fayetteville VA Hospital Historic District played in the mission of the federal government through the VA to provide quality health care to the nation’s veterans, primarily those who served in World War I and World War II. Thousands of veterans from North Carolina received subsidized general medical and surgical care during the period of significance that they may not have received if the federal government had not provided such treatment for them. Initial construction of the hospital in 1939 provided slightly over 300 beds for general medical and surgical patients. The hospital began receiving patients on November 22, 1940, the first being a veteran of the Philippine-American War. A newspaper article stated prior to the hospital’s dedication that “Nowhere in all America is there a hospital that is finer than this six-storied hospital.” The 1940 newspaper article also states that: “Altogether Fayetteville is prouder of its new Veterans Facility and its acquisition than of anything else that has come its way in half a century.” More than 2,100 veterans were admitted to the hospital in its first year of operation, requiring the services of fifteen physicians, two dentists, a pharmacist, eight sub-professional personnel, forty-five nurses, and fifty-one attendants. The hospital served veterans in North Carolina and portions of Virginia and South Carolina. A 1942 newspaper article stated: “The hospital is complete and modern in every detail.” The newspaper article continued on about the amenities offered to patients, such as a library, recreation rooms on each floor, a large recreation room in the service building, and the canteen. Over 2,800 veterans were treated at the hospital during its first 16 months in operation. During the fiscal year 1944 the number of patient beds was reduced slightly, with the capacity of the hospital declining to 298 beds. By the end of June 1946 the general medical and surgical

32 “Handsome Unit Cost More Than Million Dollars,” Fayetteville Observer, October 17, 1940.
34 “Handsome Unit Cost More Than Million Dollars,” Fayetteville Observer, October 17, 1940.
36 “Fayetteville Veteran’s Hospital Now Ready for Use,” News and Observer, October 13, 1940.
37 Ibid.
38 B. A. Cockrell, “Mortality Rate Runs Lower Than Average of General Hospitals,” Fayetteville Observer, December 4, 1941.
39 “Uncle Sam Remembers Veterans of Wars,” unknown newspaper, April 12, 1942, located in the vertical files of the Cumberland County Public Library, Fayetteville, North Carolina.
40 Ibid.
hospital had a capacity of 335 beds, although 27 beds were considered emergency beds. The 335 beds were classified for the following types of patients: general medical and surgical, 267 beds; tuberculosis, 8 beds; and neuropsychiatric, 60 beds. Expansion of the hospital was required in the immediate post-World War II years; the expansion of the main building (Resource 1, 1939) increased the capacity of the hospital to over 400 beds in 1947. On June 20, 1948, the hospital had 230 admitted patients, including: 178 general medical and surgical patients; 5 tuberculosis patients; and 47 neuropsychiatric patients. According to the 1949 and 1950 annual reports of the VA, the Fayetteville hospital continued to be designated as a general medical and surgical facility with a capacity of 416 beds. The Fayetteville VA Hospital Historic District continues to serve as a physical reminder of medical care provided by the federal government through the VA to veterans throughout the period of significance.

Areas of Significance: Criterion C

Architecture

The Fayetteville VA Hospital Historic District is eligible under Criterion C in the area of Architecture at the state level of significance as an excellent example of a Period II general medical and surgical Second Generation Veterans Hospital utilizing classical revival architectural styles including elements of the Colonial Revival and Classical Revival styles. The Fayetteville VA Hospital Historic District retains buildings and landscape characteristics of the general medical and surgical hospital sub-type, as buildings that were constructed to fulfill the needs of the hospital during the period of significance continue to exhibit the same architectural stylistic elements today. The Colonial Revival and Classical Revival styles were nationally and locally popular during the period of significance and suggest a strong national pride following World War I and continuing beyond the Second World War. This architectural vocabulary was the most prevalent of those utilized for the Second Generation Veterans Hospitals, and the Fayetteville VA Hospital is an excellent example of the use of the Colonial Revival and Classical Revival styles within this typology. The Fayetteville VA Hospital Historic District includes characteristics of Period II general medical and surgical hospitals, such as its location near town and major transportation routes; a smaller campus size than other veterans hospital sub-types, such as neuropsychiatric hospitals; a monumental main building; no patient ward building other than the main building; a kitchen/dining hall building that may also incorporate maintenance and utility functions; residential quarters distanced from the central core group of administration/patient care buildings; and central core buildings connected by an enclosed corridor. Rather than construct additional patient buildings at the Fayetteville VA Hospital, additions were constructed to the main building. Another difference exhibited by the Fayetteville VA Hospital Historic District is that the service building (Resource 3) includes not only the warehouse function, but also the recreational function that is commonly contained within a separate recreational building. The Fayetteville VA Hospital Historic District also displays the spatial relationships of many Second Generation Veterans Hospitals of this sub-type including discrete separation of patient housing and support, staff residential, and maintenance/utility activities. The

Fayetteville VA Hospital Historic District also utilized standardized designs employed for Period II veterans hospitals. Similar, if not identical, buildings can be found at other Period II Second Generation Veterans Hospitals of several sub-types. The main building (Resource 1, 1939) shares commonalities in design, massing, and the use of decorative architectural elements with Period II main buildings located in Lebanon, Pennsylvania; Bath, New York; Indianapolis, Indiana; and Fargo, North Dakota. While none of these main buildings are identical, they do share similarities that reflect the VA’s use of standardized designs for Second Generation Veterans Hospitals. The main building (Resource 1) also illustrates the incorporation onto the building’s top floors of its central projecting pavilion of a section modeled after the Old Market House, constructed in downtown Fayetteville circa 1838. In other instances the VA has adapted its standardized designs to incorporate local building traditions or portions of historically important regional buildings. One example is the facade of the main building at the Murfreesboro VA Hospital, which includes a replica of the portico of President Andrew Jackson’s residence, the Hermitage. Standardized designs were also utilized for the staff residential and maintenance/utility buildings within the Fayetteville VA Hospital Historic District. Similar, if not identical, buildings can be found on the campuses of other Period II Second Generation Veterans Hospitals.

**Integrity**

As a historic district eligible under both Criteria A and C, the Fayetteville VA Hospital Historic District should retain a high degree of integrity of the resources’ physical characteristics, including materials, workmanship, and design, and more ephemeral characteristics related to the historic district as a whole, such as location, setting, association, and feeling. Design refers to both the individual resources and the historic district as a whole. Although the resources within the historic district do not have to be individually exceptional, the resources and the historic district as a whole have to continue to reflect the spatial patterns and associations of the hospital campus dating to the period of significance. To retain integrity under Criterion A, the individual resources must retain those character-defining features that are necessary to convey their role in the mission of the federal government, through the VA, to provide general medical and surgical care to veterans throughout the state. These features are often found in the overall form, massing, and scale of the buildings and their relationship to one another within the historic district. To retain integrity under Criterion C, the individual resources must retain those character-defining features identified with the design of the specific building type and hospital sub-type as defined in the MPDF. This includes those features required under Criterion A, as well as noteworthy stylistic details and historical materials.

The Fayetteville VA Hospital Historic District continues to serve as a medical facility and retains much of its original appearance dating to the period of significance during which the contributing resources were constructed. Contributing buildings retain most of their character defining details, especially those exhibiting Colonial Revival and Classical Revival architectural elements. Only two major resources dating from the period of significance were demolished; the boiler house chimney and water tank were removed after being partially destroyed by a tornado in 1971.46 Other buildings that appear to have been demolished that dated to the period of significance and were located within the historic district are an animal house that was located southeast of the laundry building (Resource 10) and a small guardhouse situated to the northwest of the main building (Resource 1) and south of the flag pole (Resource 14). Although the historic district has lost some of its buildings and structures dating from the period of significance, no major contributing buildings, such as patient treatment, administrative, staff residences, and maintenance/utility, have been demolished.

Although the use of the land has changed and parking lots and roadways increase the amount of paved

46 United States Department of Veterans Affairs, files of the Public Affairs Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.
surface, the spatial configuration and relationships between main buildings remain intact. While large portions of the historic district are developed with buildings and parking lots, considerable amounts of open space remain. Woodlands composed of mature stands of pine and deciduous trees are found within the northwest portion of the historic district along Ramsey Street. The developed portion of the historic district features design elements of Period II general medical and surgical Second Generation Veterans Hospitals, including a dense concentration of buildings, linear and curvilinear drives, and a short, linear formal entrance drive leading to the front of the main building (Resource 1). An exercise trail constructed after the period of significance is located in the wooded area northeast of the main entrance drive (Resource E) and southwest of the parking lot to the west of the Resources 4 and 5, the nurses’ quarters and duplex quarters (both 1939). A recreation area added after the period of significance is located in the wooded area to the north-northeast of Resource 41, a pavilion (1978), and southwest of the main entrance drive (Resource E). This recreation area contains benches, picnic tables, and a basketball court. The residential buildings are located along a slightly curving drive with a secondary lane that provides access to the rear of the buildings. These quarters have mature trees and lawns but little other landscaping.

The size of the parcel originally controlled by the VA has dwindled since the original acquisition in 1938. The VA originally owned 145 acres at the Fayetteville site, suggesting there was sufficient area for future growth of the facility’s physical plant. A portion of the property, however, is a deep ravine, and another section is located in the swampy lowlands near the Cape Fear River, east-northeast of the hospital proper. As with many Second Generation Veterans Hospitals, the General Services Administration (GSA) declared some of the land as surplus. Approximately 58 acres were transferred circa 1955 to Cumberland County, North Carolina, forming the basis of the present J. Bayard Clark Park and Nature Center. Another 8 acres were transferred from the federal government to the city of Fayetteville in 1984 for additional park land. In 1995, additional acreage was transferred to the state of North Carolina for the construction of the state veterans home. The state soldier’s home is located east-northeast of the Fayetteville VA Hospital Historic District. The Fayetteville Veterans Affairs Medical Center currently owns approximately 58 acres with the historic district comprised of approximately 32 acres.

Changes to the historic district buildings include replacement doors, replacement windows, enclosed or partially enclosed windows for smaller openings, enclosed porches, and additions. Replacement windows are found on the majority of buildings dating from the period of significance throughout the historic district, including the central core and staff residential buildings. The majority of these replacement sashes are a fixed-light sash above either a hopper or an awning window. The manager’s quarters (Resource 7, 1939) retains its original double-hung, multi-light wood sashes and the maintenance/utility buildings also retain awning windows that appear to date to the period of significance. The replacement windows moderately diminish the integrity of design, materials, and workmanship of the buildings because the replacement sashes are unsympathetic to the original design of the resources and alter their appearance dating to the end of the period of significance. Enclosing the porches of two of the residential buildings (Resources 5 and 7, 1939) impacts the design, materials, and workmanship of these resources, but the overall massing, scale, and decorative elements of the buildings continue to reflect the period of significance. Although altered, the former locations of all the open porches continue to be visibly recognizable. All buildings of the central and residential areas display other changes, such as replacement doors, modifications to window openings to accommodate doors, and enclosing the pediment windows with louvered vents. The construction of the security pavilion has minor impacts to the integrity of design and feeling of the entry drive (Resource E, 1939). Although these changes all diminish the characteristics of design, materials, and workmanship of the individual resources, they do not significantly diminish these changes to the integrity of design and feeling of the entry drive (Resource E, 1939). Although these changes all diminish the characteristics of design, materials, and workmanship of the individual resources, they do not significantly diminish these

47 United States Department of Veterans Affairs, files of the Public Affairs Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.
characteristics of the buildings, and the resources continue to contribute to the significance of the historic district.
Although none of these individual changes substantially diminish integrity, these modifications can cumulatively impact the integrity of the historic district as a whole. Even with these cumulative modifications, the historic district retains its ability to convey its historic significance. The interiors of the majority of the buildings within the historic district, although not fully investigated, appear to have lost integrity due to alterations made over time to adapt them to changing uses and standards in medical care.

Buildings and additions continued to be constructed within the historic district after the period of significance. These include additions such as the outpatient clinic constructed in 1988 onto the southwest elevation of the main building (Resource 1, 1939). The alterations to the garage and the construction of the chiller building addition (Resource 9 and 35, 1939 and 1974) have diminished the integrity of this resource; therefore, the garage and chiller building addition is not a contributing resource to the historic district. New buildings were also constructed within the historic district, such as the computer and electrical distribution buildings (Resources 21, 1986; and 37, 1977). Large parking lots have been constructed within the historic district after the period of significance, particularly west of the residential group and southwest of the main building/outpatient clinic (Resource 1, 1939), The construction/alteration of several major buildings after the period of significance, such as the additions to the main building (Resource 1, 1939) and service building (Resource 3, 1939), do impact the overall design and setting of the historic district. The construction of these additions and buildings, however, sought to mitigate the impact to the historic core by placing the alterations to the rear or side of the main buildings and utilizing construction techniques that were sympathetic in scale and material to the existing buildings. The historic district continues to provide open areas and spatial relationships in keeping with the period of significance.

Although the cumulative effect of modifications, such as the loss of some buildings, construction of buildings and additions after the period of significance, loss of original acreage, and the reconfiguration of the internal circulation system diminishes the integrity of design and setting, the historic district continues to reflect its historic significance. The evolution of the buildings and setting does not reach the point to render the historic district not eligible for listing in the National Register of Historic Places. The historic district retains the majority of resources erected during the period of significance, and the overall district retains integrity of location, setting, design, materials, workmanship, association, and feeling to convey the significance of the historic district. The Fayetteville VA Hospital Historic District continues to communicate its sense of time and place as a hospital constructed during the period of significance, its connection to other veterans hospitals of this typology, and as an excellent example of a Period II general medical and surgical Second Generation Veterans Hospital.

Historical Narrative
In the 1930s, a Veterans Administration (VA) subcommittee visited more than 30 North Carolina cities in a study of possible sites for a new veterans hospital. Influenced in part by the proximity of Fort Bragg, the subcommittee recommended that the new hospital be located at Fayetteville. On July 8, 1938, Brigadier General Frank T. Hines, Administrator of Veterans Affairs, officially announced President Franklin D. Roosevelt’s approval of the subcommittee’s recommendation.48

Several potential sites in the Fayetteville vicinity were inspected by Charles H. Stratton, consulting engineer for the VA,49 and on October 21, 1938, the Federal Board of Hospitalization accepted a 145 acre tract for the hospital reservation, located approximately 2 miles north of downtown Fayetteville on the west bank of the Cape Fear River. The parcel was once part of the Myrtle Hill plantation, the country home of Fayetteville lawyer and

49 Ibid.
United States Senator Robert Strange. Cumberland County deed records indicate that Alexander E. and Frances W. Cook conveyed the property to the United States of America on December 31, 1938.\(^{50}\)

The general contract for construction of the hospital was awarded to N.P. Severin and Company of Chicago in the amount of $1,020,000. Construction began in May 1939,\(^{51}\) and the completed facility was turned over to the VA on September 1, 1940.\(^{52}\) At that time, the campus was comprised of ten buildings, including the main building, service building, nurses’ quarters, manager’s residence, medical officers’ quarters, garage, laundry building, and boiler house.\(^{53}\) The total cost of these buildings and the fixed equipment contained therein was approximately $1,300,000.\(^{54}\) Though the original buildings were built according to standardized designs,\(^{55}\) stylistic elements of Fayetteville’s Old Market House, including its cupola and arches, were incorporated into the architecture of the main building.\(^{56}\)

The new facility was dedicated on October 17, 1940, with a keynote address delivered by Colonel George E. Ijams, assistant Administrator of Veterans Affairs. Combined with the 307-bed general medical and surgical hospital on the Fayetteville campus were the regional offices of the VA, which had previously been located in Charlotte.\(^{57}\) James S. Pittman of the Charlotte VA was appointed as the first manager of the combined facility.\(^{58}\)

The hospital began receiving patients on November 22, 1940, the first of whom was Virginia native Auburn Frank Salley, a veteran of the Philippine-American War.\(^{59}\) More than 2,100 veterans were admitted to the hospital in its first year of operation, requiring the services of fifteen physicians, two dentists, a pharmacist, eight sub-professional personnel, forty-five nurses, and fifty-one attendants.\(^{60}\)

In March 1946, the regional offices of the VA were relocated from the Fayetteville facility to Winston-Salem. Two months later, President Harry S. Truman authorized an expansion of the hospital to accommodate veterans of the recently concluded Second World War and an aging population of World War I veterans. The addition was completed the following year and increased the patient capacity of the hospital to 416 beds.\(^{61}\)


\(^{52}\) “Site For New Hospital Was Picked in ’38,” *Fayetteville Observer*, October 17, 1940.

\(^{53}\) “Uncle Sam Remembers Veterans of Wars,” unknown newspaper, April 12, 1942, located in the vertical files of the Cumberland County Public Library, Fayetteville, North Carolina.

\(^{54}\) “Handsome Unit Cost More Than Million Dollars,” *Fayetteville Observer*, October 17, 1940.


\(^{57}\) “Handsome Unit Cost More Than Million Dollars,” *Fayetteville Observer*, October 17, 1940.

\(^{58}\) “Uncle Sam Remembers Veterans of Wars,” unknown newspaper, April 12, 1942, located in the vertical files of the Cumberland County Public Library, Fayetteville, North Carolina.


\(^{60}\) B. A. Cockrell, “Mortality Rate Runs Lower Than Average of General Hospitals,” *Fayetteville Observer*, December 4, 1941.

During the 1950s, the federal government initiated a campaign to divest itself of excess property. On November 24, 1954, 57.8 acres of the Fayetteville reservation was conveyed to Cumberland County without remuneration.62

Over the last 50 years a number of changes have taken place on the Fayetteville campus. A thirty-nine bed nursing home unit was opened in an existing wing of the hospital on June 15, 1965.63 In 1977, a 10,000 square foot warehouse with space for expansion of patient care services was constructed.64 This expansion appears to be the single-story, flat-roof addition on the southeast elevation of the original portion of the service building (Resource 3, 1939). A new $10.3 million, 87,000 square foot clinical addition containing surgical, laboratory, and pharmaceutical facilities was dedicated on April 4, 1988. This is the addition on the southwest elevation of the original portion of the main building (Resource 1, 1939). In August 1988, a twenty-five bed alcohol dependence treatment unit was opened at the hospital.65 A 40 foot carillon bell tower, donated by American Veterans (AMVETS) at an approximate cost of $50,000, was dedicated on April 17, 1993.66 This carillon bell tower is located within the historic district, to the west-southwest of the main building (Resource 1). Finally, the first North Carolina State Veterans Home, located adjacent to the veterans medical center on acreage previously included within its reservation, was dedicated in April 1999.67 The North Carolina State Veterans Home is located to the east-northeast of the current Fayetteville Veterans Affairs Medical Center property and outside the boundary of the historic district.

Located on the medical center property is a line of earthen fortifications erected by Confederate forces in 1865. The breastworks were hastily constructed in order to defend the Confederate arsenal at Fayetteville from Federal forces under the command of General William Tecumseh Sherman. On March 11, 1865, Sherman’s troops entered Fayetteville from the south, rather than from the north as anticipated, thereby rendering the breastworks useless as a means of defense. Federal forces laid waste to the arsenal and any other property that might be of use to the Confederacy. The fortifications were thereafter sheltered by trees and remain well preserved.68 The Confederate breastworks were listed in the National Register of Historic Places on October 7, 1981.69

62 United States Department of Veterans Affairs, files of the Facilities Management Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.
64 “VA Center to Celebrate 50 Years of Service,” Fayetteville Observer, September 22, 1990.
65 “Fayetteville VA Medical Center,” Hospital News North Carolina, January 1989.
68 United States Department of Veterans Affairs, files of the Facilities Management Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina; Sandra Webb and Karen Tupek, Confederate Breastworks (Fayetteville, North Carolina) National Register of Historic Places nomination (Veterans Administration, 1981), located in the files of the United States Department of Veteran Affairs, Historic Preservation Office, Office of Construction and Facilities Management, Washington, D.C. This nomination does not appear to have been submitted to the National Park Service.
69 Sandra Webb and Karen Tupek, Confederate Breastworks (Fayetteville, North Carolina) National Register of Historic Places nomination (Veterans Administration, 1981), located in the files of the United States Department of Veteran Affairs, Historic Preservation Office, Office of Construction and Facilities Management, Washington, D.C. This nomination does not appear to have been submitted to the National Park Service.
United States Department of the Interior
National Park Service

National Register of Historic Places
Continuation Sheet

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United States Department of the Interior
National Park Service

National Register of Historic Places
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Fayetteville Veterans Administration Hospital Historic District

Name of Property
Cumberland County, North Carolina

County and State
U.S. Second Generation Veterans Hospital

Name of multiple listing (if applicable)


United States Department of Veterans Affairs. Files of the Facilities Management Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.

United States Department of Veterans Affairs. Files of the Public Affairs Office, Fayetteville Veterans Affairs Medical Center, Fayetteville, North Carolina.

1957 (Photo revised 1987) Fayetteville, North Carolina, and 1957 (Photo revised 1987) Vander, North Carolina, 7.5-minute topographic quadrangle maps depicting the National Register boundary.
National Register boundary indicated on an aerial map.
Sketch map indicating National Register boundary, contributing and noncontributing resources.
Name of Property: Fayetteville Veterans Administration Hospital (same for all photos)

City, County, State: Fayetteville, Cumberland County, North Carolina (same for all photos)

Photographer: Trent Spurlock (same for all photos)

Photo date: January 5–8, 2011 (same for all photos)

Original Negative: NA (submitted compact disc, same for all photos)

1. View to the southeast to Resources E, 14, and 1.
2. View to the southeast to the central pavilion of Resource 1.
5. View to the northeast to Resources 1, 3, and 8.
6. View looking northwest to Resources 8, 1, and 3.
7. View to the north-northwest to Resources 1 and 3.
8. View looking southeast to Resources 9, 36, 11, and 10.
9. View looking northeast to Resources 41-T, 7, 6, 5 and 4.
13. View looking southeast to Resources 7, 6, 5, and 4.
15. View to the southeast looking at the northeast and façade elevations of the 1947 addition to Resource 1.
17. View to the west-southwest looking at the southeast entrance to the 1988 addition to Resource 1.
18. View to the south-southeast looking at the northeast and façade (northwest) elevations of Resource 3 and the northeast elevation of Resource D.
19. View to the northeast to the façade (southwest) elevation of Resource 21.
Sketch map indicating locations of photographs corresponding to those of the Photograph Continuation Sheet.