

United States Department of the Interior
National Park Service

National Register of Historic Places Registration Form

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

1. Name of Property

historic name Charleston Naval Hospital Historic District

other names/site number _____

2. Location

street & number Former Charleston Navy Base including portions of Turnbull Avenue, Hobby Street, Avenue F, Avenue G, Avenue H, Avenue I, Truxton Avenue, and Marine Avenue. ☐ not for publication

city or town North Charleston ☐ vicinity

state South Carolina code SC county Charleston code 019 zip code 29408

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:

X national statewide local

Elizabeth M. Johnson, Deputy State Historic Preservation Officer, S.C. Department of Archives and History, Columbia, S.C.

Signature of certifying official/Title

Date

State or Federal agency/bureau or Tribal Government

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

Signature of commenting official

Date

Title

State or Federal agency/bureau or Tribal Government

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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:)

Signature of the Keeper

Date of Action

5. Classification

Ownership of Property

(Check as many boxes as apply.)

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

Category of Property

(Check only **one** box.)

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

Number of Resources within Property

(Do not include previously listed resources in the count.)

Contributing	Noncontributing	
32	2	buildings
		district
		site
	1	structure
		object
32	3	Total

Name of related multiple property listing

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

N/A

Number of contributing resources previously listed in the National Register

0

6. Function or Use

Historic Functions

(Enter categories from instructions.)

Health Care - Hospital

Defense – Naval Facility

Domestic – Institutional Housing

Current Functions

(Enter categories from instructions.)

Vacant

Domestic – Institutional Housing

Domestic – Single/Multiple Dwelling

Domestic – Secondary Structure

Business – Office Building

Work In Progress

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7. Description

Architectural Classification

(Enter categories from instructions.)

Mission/Spanish Colonial Revival

Colonial Revival

Bungalow/Craftsman

Moderne

Materials

(Enter categories from instructions.)

foundation: Poured Concrete, Brick

walls: Terracotta Block, Concrete, Asbestos

Siding, Wood

roof: Ceramic Tile, Asphalt Shingles, Synthetic Roll

other: Glass Block

Narrative Description

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

Summary Paragraph

The Charleston Naval Hospital Historic District is an intact collection of thirty-two buildings located in the northwest corner of the former Charleston Navy Base. This district sits to the west of both the Charleston Navy Yard Historic District and the Charleston Navy Yard Officers' Quarters Historic District listed in the National Register of Historic Places at the national level of significance on August 9, 2006 and March 2, 2007, respectively. The extant buildings and structures represent two periods of development at the Naval Base that closely relate to the growth of the United States Department of the Navy during the twentieth century. Two resources date from World War I, but the great majority of resources (including the main hospital complex) date from just prior to and during United States involvement in World War II. There are three groups of buildings that comprise the Charleston Naval Hospital District: treatment facilities centered on the main hospital complex, service related buildings located to the east of the main hospital, and residential buildings largely located to the west and south of the hospital. While demolition, vandalism and unsympathetic alterations have affected the historic characteristics of some of the individual resources, this collection of extant buildings provides a good representation of the significance of the Charleston Naval Hospital and forms a cohesive district with a high degree of integrity. Many of these hospital buildings sit vacant today but a few completed projects and one ongoing historic rehabilitation effort have brought a renewed sense of energy to this collection of buildings.

Narrative Description

Naval Hospital Treatment Facilities

The focus of the Charleston Naval Hospital Historic District is the World War II-era hospital complex, comprised of two central buildings and eight treatment wings arranged around a central courtyard. All ten of the hospital buildings are constructed on poured concrete foundations with concrete and terracotta block walls. Their smooth white walls and traditional hipped roofs with overhanging eaves covered in red terracotta roof tiles are indicative of the Spanish Colonial or Mission Revival style. While the same materials and architectural language are used on all of the main hospital buildings, NH45 is differentiated from the others in form and

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architectural details. Its two-story elevation looks south onto Turnbull Avenue providing the front façade for the hospital and defining the south side of the internal courtyard. The north side of the courtyard is delineated by the short T-shaped end of Building NH46 and enclosed one-story corridors connecting the building to the rest of the complex. Additional corridors complete the east and west sides of the courtyard by connecting the eight ward wings (NH47-54). The ward buildings are distributed symmetrically running east to west, with four wards to each side of the courtyard. Since the property slopes down gently to the east, the four wings east of the courtyard (NH47, NH49, NH51, and NH53) have full basements while the western wards have none.

A separate treatment facility, NH55, sits just south of Turnbull Avenue facing the front of the main hospital building at NH45. This two-story rectangular building has a poured concrete foundation with terracotta block walls painted white. Like the main hospital, NH55 has a hipped roof, overhanging eaves, and symmetrically placed openings. Each of these buildings and their alterations are explained further below.

Main Hospital Complex

1. 1690 Turnbull Avenue (NH45) Hospital Administrative Building - 1940-2

This two-story concrete and terracotta block building with white walls and a series of complex hipped roofs covered with terracotta tiles is the visual and administrative center of the Charleston Naval Hospital. The building is symmetrically designed with a large central section projecting slightly and two slightly recessed wings. This central section of the building has six bays of windows on either side of center and has a saddle roof raised above the primary roof. Three large eyebrow shaped dormers with copper louvered vents adorn the south and north roof faces of this central projection. East and west facing gable vents at the roof ridge mark the spot where the roof systems connect. The main hipped roof extends to cover the east and west wings, with each end topped by a large hipped dormer at the attic level. These large dormers in turn have smaller hipped dormers tied into them facing north over the courtyard. Each wing of the building holds four window bays and has a large eyebrow dormer on the south roof. The front entrance to the building is marked with a one-story concrete portico with a flat roof and curved concrete walls to each side of a concrete stairway. The portico covers the main entrance, a pair of glass doors set into a large field of original glass block. On both the east and west ends of the south façade monumental fields of glass blocks join the first and second stories. Throughout the remainder of the building window openings are placed at regular intervals with concrete sills and contain twelve-over-twelve wooden windows with their sashes and frames painted black. On the second floor directly above the entrance portico a bank of three grouped windows has been replaced with glass block to match the entrance. More replacement glass block has been added to enclose the sides of the entrance portico, which was originally open. The plan of NH45 features a large central section connected to east and west wings by a double loaded corridor. Much of the building housed administrative offices and services on the main level and in the basement including a board room, medical library, pharmacy, chapel, disbursing office, civil readjustment office, provost marshal's office, veteran's representative office, and archives. The second floor of the building included the officers' lounge and important treatment facilities including the operating suite and x-ray department. The operating suites were situated in the southeast and southwest corners of the second floor that allowed even, natural light through the monumental glass block fields along the south façade.

2. 1690 Avenue H (NH46) Subsistence Building - 1940-2

This one-story building with basement level has the largest building footprint at the Naval Hospital. The building is a compact T-shape with the short top of the "T" creating the north end of the hospital complex courtyard. As the other buildings of the complex, this building has concrete and terracotta block walls painted white and is covered with a hipped roof of terracotta tiles. A large chimney pierces the roof near the center of the building for ventilation from equipment in the kitchen and boiler room areas housed in the building on the main floor and basement, respectively. A nearly flat porch roof has been added along the majority of the west

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side of the building to provide cover along a porch. A small addition to accommodate an updated heating system was added to the northeast side of the building after the period of significance.

Each ward of the main hospital complex had fourteen bays. Each bay contains paired windows and is separated from the next by an engaged pillar. These wards were designed to have enclosed sunrooms at the end furthest from the center of the complex to provide fresh light and air for patients in a lounge setting away from their beds. A few of the wards have been altered to enclose windows openings and screened porches as noted below.

3. 1420 Avenue H (NH48)
Sick Officers' Quarters - 1940-2

This one-story concrete and terra cotta block building with white walls has a hipped roof with overhanging eaves and is covered with terra cotta tiles. Located to the west of the Administration building, this ward separated officers from enlisted sailors in the hospital until construction of the Sick Officers' Quarters Annex NH55 in 1945. The building retains most of its original windows and retains its sunroom.

4. 1450 Avenue H (NH50)
Medical Ward - 1940-2

This one-story concrete and terracotta block building with white walls has a hipped roof with overhanging eaves and is covered with terracotta tiles. The windows on the western half of this building and the sunroom at the west end have been enclosed, but the overall integrity of the building has not been compromised.

5. 1460 Avenue H (NH52)
Neuro-Psychiatric Ward - 1940-2

This one-story concrete and terracotta block building with white walls has a hipped roof with overhanging eaves and is covered with terracotta tiles. The building retains most of its original windows and its sunroom.

6. 1470 Avenue H (NH54)
Contagious Ward - 1940-2

This one-story concrete and terracotta block building with white walls has a hipped roof with overhanging eaves and is covered with terracotta tiles. Nearly all of the windows in this ward have been enclosed. The building retains its sunroom at the west side of the building.

7. 2325 Avenue F (NH47)
Surgical Ward and Emergency Room - 1940-2

This one-story with full basement concrete and terracotta block building with white walls has a hipped roof with overhanging eaves and is covered with terracotta tiles. The basement level of this building was designed to provide access for ambulances and contained the Emergency Room. The building retains most of its original windows and its sunroom.

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8. 2335 Avenue F (NH49)
Genito-Urinary Ward - 1940-2

This one-story with full basement concrete and terracotta block building with white walls has a hipped roof with overhanging eaves and is covered with terracotta tiles. The building retains most of its original windows and its sunroom.

9. 2355 Avenue F (NH51)
EENT Ward and Dental Offices - 1940-2

This one-story with full basement concrete and terracotta block building with white walls has a hipped roof with overhanging eaves and is covered with terracotta tiles. The building retains most of its original windows. The sunroom has been enclosed. A bridge passageway was added to link the center of this ward to NH53 after the period of significance. The screened porch at the east end of the building has been enclosed with concrete block.

10. 2365 Avenue F (NH53)
Dependants Ward - 1940-2

This one-story with full basement concrete and terracotta block building with white walls has a hipped roof with overhanging eaves and is covered with terracotta tiles. The building includes an original elevator shaft on its northwest side where it meets Building NH46. The building retains the most of its original windows and its sunroom.

11. Turnbull Avenue
Structure 520B - Flagpole - 1956 (Noncontributing)

This structure stands at the south entrance to the hospital complex centrally placed in front of the Administration Building (NH45). It was added to the campus after 1953.

12. 1691 Turnbull Avenue (NH55)
Sick Officers' Quarters Annex - 1944-5

This symmetrical two-story medical treatment building is constructed on a poured concrete foundation with terracotta block walls painted white and topped with a low-pitched roof with shallow overhanging eaves. A central block with a hipped roof projects north over the main entrance to the building, setting it apart from the two wings of the building covered by a gable on hip roofs. The primary entrance features a field of glass blocks and is covered with a single-story flat roof portico supported by paired wooden pillars with Tuscan details. Authorized in the summer of 1944 and completed by January of 1945, NH55 was built to alleviate overcrowding in the main hospital complex and to provide additional space to provide treatment for sick and wounded military officers. It was often referred to simply as the "S.O.Q." or Sick Officers' Quarters.

Support Buildings

Just to the east of the treatment facilities is a collection of three support buildings placed in close proximity to the treatment facilities. A recreation building (NH62), a medical supply storage building (NH68) and a nurse's quarters (NH61) remain from this service yard. This section of the district has seen the most change since the period of significance. The Recreation Building (NH62) was frequently renovated as a hub of patient and staff activity throughout Navy ownership and has had numerous alterations to its façade and roof so that it no longer contributes to the significance of this district. Originally, this area also held the Corpsmen's Quarters (NH1168) as housing for male medical corps members, a Boiler House (NH67) for heating, the WAVes (Women

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Accepted for Volunteer Emergency Service) Quarters (NH23) as housing for single female volunteers and an additional Emergency Ward (NH1137) for treating patients that predated the main hospital. All of these structures were demolished before the property was decommissioned in 1995. A water tower (NH78) in this area was determined eligible to contribute to a potential Naval Hospital District when the base was closed but has been demolished since that time.

13. 1580 Turnbull Avenue (NH61)
Nurses' Quarters - 1941-2

The nurses' quarters NH61 is a two-story rectangular building that shares similar Spanish Colonial details to the treatment facilities nearby. Built on a poured concrete foundation, its concrete frame and terracotta block walls are painted white to imitate stucco. Its low-pitch hip roof with overhanging eaves is covered by red terracotta tiles. The building has an off-center entrance to the east side of the building. What remains of the building is the portion that was constructed of concrete during the first phase of building at the hospital. It is essentially the central portion and the west wing of a three part building. The east wing was constructed in 1943 of wood frame and covered with siding, thus completing the original plan with the entrance centrally placed. However, the east wing was demolished prior to the closing of the Naval Base in the 1990s. The remaining center section and west wing features windows in a regular alternating pattern of paired and single windows. A glazed sunroom sits on the west end of the building on both levels. The window openings remain intact but the window sashes have been replaced with two-over two horizontal paned windows.

14. 1535 Hobby Street (NH68)
Medical Supply Warehouse - 1943

This utilitarian structure is built on a poured concrete foundation with a poured concrete frame and terracotta block walls. Large garage-type door openings on both the south and north sides allowed materials and supplies to be loaded on or off of truck and railroad cars. The interior of the building was largely open for storing palettes of goods but did include an office space, blood bank, secured pharmaceutical storage, and refrigerated storage in the plan. Large banks of windows and smooth white walls give the building a modern, streamlined appearance. A recent rehabilitation of the building introduced offices into many of the interior spaces while maintaining many of the characteristic features of the building.

15. 2340 Avenue F (NH62)
Recreation Building (Noncontributing)

This building was opened to great fanfare in 1945 and included a recreation room and auditorium for patients to engage in a variety of activities apart from their treatment wards. Both sections of the building were extensively added to in 1980 and the interior of the building was remodeled including removal of the timber trusses of the auditorium roof. This building no longer contributes to the significance of the district.

Residential Quarters

Residential buildings at the Charleston Naval Hospital were planned and located apart from the institutional buildings of the hospital. Six detached single-family quarters remain to the north and the west of the main hospital. All six of these residences were constructed to be used by the administrative medical officers. Two of the houses to the north of the hospital (Buildings 760 and 761) were built during World War I and have typical Craftsman bungalow features. The other four residences were constructed during World War II and are similar in style to the treatment buildings with modernized Spanish Colonial designs.

A separate group of nine residential buildings, eight two-family and one single-family, were built for Navy officers south of Turnbull Avenue, just south and west of the main hospital complex. All of these buildings were constructed during the buildup on the base prior to World War II and are nearly identical to each other. Six of

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these duplex units are arranged in an irregular manner along Avenue H and Avenue G between Turnbull Avenue and Second Street. Two other duplexes (Buildings M-9/M-8 and M-7/M-6) are located south of the others along Commissary Street. The lone single-family residence in this area (Building M-5) follows the same plan as the duplex buildings but is a stand-alone unit. Three garages built of poured concrete, two single garages (Buildings M-2A and M-1A) and one double garage (Building M-3A) remain in this residential area. These garages predate the World War II era housing and were associated with buildings that were subsequently demolished.

**16. 1795 Avenue F (Building 758 / Building NH65)
Commanding Officer's Quarters/Dwelling - 1942**

This two-story concrete block building, the Commanding Officer's Quarters, is painted white and covered with a low pitch hip roof with gable roof vents and overhanging eaves with exposed rafter tails. Like its neighbor, Building 759, it is a mix of the Spanish Colonial forms found elsewhere at the hospital and Modern ornament, including a streamlined geometric door surround accented with blue paint on the north entrance. The main body of Building 758 is connected on its west side by a small hyphen to a one-story garage with pyramid roof. There is a two-story extension on the south façade of the building with a screened porch on the first level and an enclosed sunroom on the second level. On the interior, the building contains formal and service space on its main level with bedrooms on the second floor. An entrance hall and open, winding staircase occupy the center of the first floor behind the off-center front doorway in the north facade. A living room with fireplace extends the entire depth of the building on the east end of the first floor and leads into a dining room at the center of the building behind the entrance hall. The west end of the first floor includes a den, pantry and the kitchen. A servant's bedroom and bathroom is included in the garage extension and connects to the kitchen through a laundry room and boiler room in the hyphen.

**17. 1801 Avenue F (Building 759 / Building NH64)
Medical Officer's Quarters/Dwelling - 1942**

This two-story residence, the Medical Officer's Quarters, is the mirror image of its neighbor to the east, Building 758. Its concrete block walls are painted white and covered with a low pitch hip roof with gable roof vents and overhanging eaves with exposed rafter tails. It is a mix of the Spanish Colonial forms found elsewhere at the hospital and Modern ornament, including a streamlined geometric door surround accented with blue paint on the north entrance. The main body of Building 759 is connected on its east side by a small hyphen to a one-story garage with pyramid roof. There is a one-story enclosed sunroom on the south façade of the building. On the interior, the building contains formal and service space on its main level with bedrooms on the second floor. An entrance hall and open, winding staircase occupy the center of the first floor behind the off-center front doorway in the north facade. A living room with fireplace extends the entire depth of the building on the west end of the first floor and leads into a dining room at the center of the building behind the entrance hall. The east end of the first floor includes a den, pantry and the kitchen. A servant's bedroom and bathroom is included in the garage extension and connects to the kitchen through a laundry room and boiler room in the hyphen.

**18. 1849 Avenue F (Building 760 / Quarters 2)
Dwelling - ca. 1917**

This one-story square building on brick piers has wood siding over frame walls. It is topped with a low pyramid shaped roof with overhanging eaves and exposed rafter tails. The roof covers porches on the north and east sides of the building which are enclosed with original screening. An additional porch with shed roof on the west side of the building has been enclosed. Originally called Quarters #2, the building was designed with three bedrooms, a dining room and two shared bathrooms around a central living room. A wing extends to the south side of the building that contains the kitchen and a servant's suite with bedroom and bathroom. A separate boiler building sits just to the west of the kitchen wing.

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19. 1895 Avenue F (Building 761 / Quarters 1)
Dwelling - ca. 1917

This one-story square building on brick piers has wood siding over frame walls. It is topped with a low pyramid shaped roof with overhanging eaves and exposed rafter tails. Dormers sit atop the north, east and west sides of the main roof. The roof extends over porches on the north and west sides of the building. Originally called Quarters #1, the building was designed as a single family home with four bedrooms, a dining room, and library arranged around a central living space with fireplace. The living room was accessed directly from the front door on the north façade and served as the circulation space between all other rooms. Three bathrooms were placed in the main body of the house to be shared between secondary rooms. A service wing juts out from the south side of the building and originally contained the kitchen and a servant's bedroom and bathroom. This building was sensitively rehabilitated into office space for a non-profit foundation in 2006. Like its neighbor screens once enclosed the front porch but have been removed.

20. Avenue H (Building 1418)
Garage/Storage - ca. 1918

This single-car frame garage is located just south of building 760 and exhibits the same bungalow features as the World War I era resources at the hospital. The building has a large opening on the north side and a shed roof sloping down from north to south. A small overhang with exposed rafter tails covers the vehicle doorway.

21. Avenue H (Building 1414)
Garage/Storage - ca. 1918 (Non-Contributing)

This multi-vehicle garage has the same stylistic details as the World War I era bungalows located to the north, with a hipped (also pyramid) roof and exposed rafter tails. Three sides of the building are the original frame covered by wood siding. Two window openings on the east side and one each on the north and south side have been covered with plywood. The west side of the building, once open, has been enclosed with plywood.

22. 1463 Avenue H (Building 762 / Building P-2)
Dwelling - 1937

This two-story rectangular frame house covered with a low hipped roof has a two-story portico on the south side of the building with a hip roof facing its neighbor, Building 763. Its white stucco walls and red asphalt shingle roof hint at the same stripped down Spanish Colonial language as other buildings at the hospital. A one-story back porch on the west side of the building is covered with a shed roof. On the first floor of the building a living and dining area on the east side of the house are separated from the kitchen, laundry and servants bathroom on the west side by a narrow enclosed stairway. Two doorways from the front (south) porch lead directly into the living room and the stairway. The second floor contains three bedrooms and a bathroom arranged around a hallway from the stairway.

23. 1451 Avenue H (Building 763 / Building P-1)
Dwelling - 1937

This two-story rectangular frame house covered with a low hipped roof has a two-story portico on the north side of the building with a hip roof across a green space to its mirror image, Building 762. White stucco walls and a red asphalt shingle roof hint at the same stripped down Spanish Colonial language as other buildings at the hospital. A one-story back porch on the west side of the building is covered with a shed roof. On the first floor of the building a living and dining area on the east side of the house are separated from the kitchen, laundry and servant's bathroom on the west side by a narrow enclosed stairway. Two doorways from the front

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(south) porch lead directly into the living room and the stairway. The second floor contains three bedrooms and a bathroom arranged around a hallway from the stairway.

Each of the **eight duplex buildings** below is composed of two residential units joined together by their garages. Each unit in the duplex is a two-story rectangular frame residence clad with asbestos shingle siding and topped with a high hip roof with asphalt shingles and an off-center chimney. Each of these duplexes was constructed according to a plan developed for use at both the Charleston Naval Base and the Parris Island Marine Corps Recruit Depot. Drawn by Charleston architect Douglas Ellington, the "House B Type" included two residences in each duplex that are joined together by a one-story hyphen. The hyphen contains a servants room, porch and a garage for each residence. The two units effectively faced away from each other with a one-story screened porch and hipped roof on their 'front' sides. Behind each screened porch a small entrance hall led directly to an enclosed central staircase. To one side of the entry hall a doorway led to a large living room running the entire depth of the unit. To the opposite side a door led to the dining room and kitchen. The second floor of each residential unit had a small hallway for circulation that connected two smaller bedrooms on one side of the stairway to a master bedroom and a shared bathroom on the opposite side. Despite their front porches, access to each unit from the street appears to have been through the hyphen as their addresses reflect below.

24. 1350 Avenue H (Building KK-JJ)
Naval Officer Duplex Dwelling - 1941

One of six duplexes constructed between Turnbull Avenue and Second Street. The building faces southwest toward Avenue H and includes a circular driveway at the street.

25. 1304 Avenue H (Building II-HH)
Naval Officer Duplex Dwelling - 1941

One of six duplexes constructed between Turnbull Avenue and Second Street. The building faces directly west toward Avenue H.

26. 1288 Avenue H (Building FF-GG)
Naval Officer Duplex Dwelling - 1941

One of six duplexes constructed between Turnbull Avenue and Second Street. The building faces northwest toward Avenue H.

27. 1345 Avenue G (Building LL-AA / Building D-AA)
Naval Officer Duplex Dwelling - 1941

One of six duplexes planned and constructed between Turnbull Avenue and Second Street. The building faces directly east toward Avenue G.

28. 1311 Avenue G (Building BB-CC)
Naval Officer Duplex Dwelling - 1941

One of six duplexes constructed between Turnbull Avenue and Second Street. The building faces east - northeast toward Avenue G.

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**29. 1293 Avenue H (Building DD-EE)
Naval Officer Duplex Dwelling - 1941**

One of six duplexes constructed between Turnbull Avenue and Second Street. The building faces northeast toward Avenue G and includes a circular driveway at the street.

**30. Second Street (Building M-3A)
Garage - 1930s**

This one-story poured concrete garage with flat roof has a low trapezoidal parapet above its four vehicular openings. Three of the south-facing doorways have wooden panel overhead doors. One of the central openings has been enclosed with a frame wall and door.

**31. Second Street (Building M-2A)
Garage - 1930s**

This one-story poured concrete garage with flat roof has a low triangular parapet above its single vehicular opening. The south facing doorway is currently open.

**32. Second Street (Building M-1A)
Garage - 1930s**

This one-story poured concrete garage with flat roof has a low triangular parapet above its singular vehicular opening. The south facing doorway has a wood recessed panel overhead door.

**33. 1804 Marine Avenue (Building M-5)
Naval Officer Dwelling - 1942**

This single unit house has the same features as the duplexes situated around it and was built at the same time following the "House B Type" design. It is essentially half of the duplex design. The main body of this two-story frame and asbestos siding residence is rectangular with a hipped roof and garage on the north side of the building.

**34. 1761 & 1775 Commissary Street (Building M6-M7)
Duplex Dwelling - 1942**

The easternmost of two duplexes situated south of Commissary Street, this building faces directly north.

**35. 1801 & 1809 Commissary Street (Building M8-M9)
Duplex Dwelling - 1942**

The westernmost of two duplexes situated south of Commissary Street, this building faces directly north.

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8. Statement of Significance

Applicable National Register Criteria

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

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

Criteria Considerations

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

Property is:

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

Areas of Significance

(Enter categories from instructions.)

Health/Medicine

Military

Architecture

Period of Significance

1917-1949

Significant Dates

1917

1941-1945

Significant Person

(Complete only if Criterion B is marked above.)

Cultural Affiliation

Architect/Builder

Period of Significance (justification)

This district derives significance from a collection of twentieth century buildings and structures that are examples of the development of US Navy operations in Charleston and of the modernization of military medicine in the United States. The earliest extant structures in the district date from 1917 during construction of hospital facilities to serve an increased labor force at the base during World War I. The large majority of the

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historic resources in the district date from World War II when the first permanent hospital facilities were constructed at the base. The end date of 1949 was selected to incorporate the demobilization period after the Second World War and the reorganization of the Bureau of Medicine and Surgery into a standing professional medical outfit. This end date is later than many World War II military actions because it reflects the continued need to treat medical and rehabilitation cases at permanent military hospital facilities during and after the end of demobilization of fighting forces. While the Charleston Naval Hospital continued to treat patients at this facility until 1972, including casualties from the Korean and Vietnam conflicts, there is little reflected in the buildings, structures, or landscape of the historic district that dates from this time period.

Criteria Considerations (explanation, if necessary)

Statement of Significance Summary Paragraph (Provide a summary paragraph that includes level of significance and applicable criteria.)

The buildings and structures in the Charleston Naval Hospital District are significant under criteria A as an example of the United States effort to mobilize medical support for the Navy during World Wars I and II and the Navy's ability to create a permanent and professional medical service for Navy personnel and their dependents. These healthcare facilities were placed at the Charleston Navy Base and planned in a manner consistent with military protocol to organize medical treatment, support services, and residential units.

The district is also significant under criteria C with buildings and structures that reflect the time periods in which they were constructed corresponding to large building periods at the Charleston Navy Base during the First and Second World Wars. The majority of buildings have a unifying architectural language which incorporates both Spanish Colonial and Mission style forms with Modern details and materials. Two residential buildings and support structures date from the First World War and exhibit Craftsmen Bungalow features.

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

National Context

At the end of the nineteenth and beginning of the twentieth century, the United States saw a growing need to increase the size of its naval fleet and to develop the United States Navy as a stronger institution. In the last decade of the nineteenth century, reports showing the US Navy lagging behind other countries in fleet size, a heightened national interest in international politics and policing, as well as the enhanced speed and safety of maritime travel from technology and the newly opened Panama Canal pushed the federal government to make major changes to the US Navy. A handful of Navy shipyards were constructed around the country to fulfill the progressive expansion of the fleet, including the Charleston Naval Shipyard. By the dawn of World War I the United States investment in shipbuilding made it one of the world's largest naval forces in tonnage.¹

With Navy expansion at the end of the nineteenth century, a need arose to also improve supporting services and institutions, including medical treatment for sailors. Since the Revolutionary War, some form of medical service for wounded sailors has been provided aboard every Navy ship and shore establishment. The level of training, however, for each "surgeon" and "surgeon's mate" varied. Professional organization and standardized training for these men only came about on the eve of the Spanish American War, when President William

¹ Charleston Navy Yard Historic District National Register Nomination, p. 15

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McKinley approved a bill on June 17, 1898 that included stipulations to create the Hospital Corps of the United States Navy.²

Despite the increased emphasis on shipbuilding and expansion of services during the early years of the twentieth century, on the eve of World War I the US Navy still found its fleet and organization inadequate for a possible intervention of hostilities in Europe. In 1916, further expansion of the fleet began and continued throughout American participation in World War I. The Hospital Corps mirrored this growth. In the same year, 1916, authorization came to increase the size of the Corps by five times to 6,000 men. By the end of 1918, there were 17,000 hospital corpsmen in service. While the government devoted incredible resources and saw great public participation during the war, much of the military's supporting infrastructure and related operations were quickly fashioned to support wartime efforts, which led to some setbacks.³

Healthcare at the turn of the twentieth century was still developing as a science and as an organized profession. During mobilization and wartime, temporary military camps both in the United States for training and in Europe for war operations were established. These camps were composed of tents and sometimes temporary buildings which lacked basic necessities and created an environment for the spread of communicable diseases. Outbreaks of tuberculosis and influenza were common in such environments as well as along the frontlines and in naval vessels which added greatly to the level of casualties during the war. Equally disastrous was the difficulty of supplying medical services and clean materials to the frontlines as well as evacuation of casualties.⁴

After the great upheaval of World War I, the United States and international powers sought to decrease the level of standing military units around the world through a series of disarmament conferences with the hope of avoiding a similar engagement. These efforts coupled with an alarming national debt from the First World War meant that military facilities were scaled back to pre-war levels and even reduced. With the onset of The Great Depression at the end of the 1920s, shipbuilding activity throughout the Navy nearly ceased and supporting facilities including medical resources were reduced to minimal levels. Despite curtailed funding from the government and a reduction in the number of military units in all branches of the armed forces, the Navy continued to modernize their weaponry and improve organization between the wars.

Franklin D. Roosevelt's public improvement programs did a great deal for military facilities around the country as a way to put people back to work during the Great Depression. These projects also served to modernize and rearm American military forces during the 1930s as tension increased on the international stage with Adolf Hitler's rise to power in Germany and Japanese expansion in the Pacific. When the United States entered World War II in 1941, the military was far better equipped and organized to meet the challenge than before entrance into World War I, but the massive nature of fighting a two front war on opposite sides of the globe required a drastic reinvestment in every part of the military.

In 1940 while war raged in Europe President Roosevelt declared a Limited National Emergency and began to expand military facilities and stockpile necessities. This extended to healthcare needs as well. The number of medical department personnel in the United States Navy more than doubled between June of 1939 and 1941 from 4,267 to 10,547 people to prepare for the possibility of military involvement. In addition to an increase in personnel, the Navy also invested heavily in new facilities for the treatment of patients. Nine new Naval Hospitals in the continental United States were planned on the eve of World War II to add to nineteen existing hospitals. These new facilities (Bethesda, San Francisco, Oakland, Seattle, Key West, Charleston, Long

² Hacala, Mark. "History of the Hospital Corps of the United States Navy" from Hospital Corpsman Course (NAVEDTRA 1425) (Washington, DC: US Government Printing Office, 2003), p. AI-1 - AI-3.

³ Navy Yard NR Nomination, p. 19-20; Hacala, p. AI-4 - AI-5.

⁴ Kline, Grace. "The Naval Hospital at Charleston, South Carolina." The American Journal of Nursing. Volume 18, Issue 8, May 1918. pp. 668-672; Hacala, p. AI-4

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Beach, Norfolk, and Norman, Oklahoma) were constructed and commissioned for use in 1942. Although these new continental facilities and three new hospitals in territories of the Pacific increased capacity for patients in the US Navy, there proved to be a greater need for beds throughout the war than imagined. The Navy struggled to keep up with the need for bed space by building "H-shaped" additions to nearly all of their medical facilities between 1941 and 1945. The standard intervals between beds in all Navy hospitals changed from 8 feet to 6 feet to maximize patient loads. For the month of June 1941 before American involvement in the war there were 7,723 patients on average in Navy hospitals. As the country mobilized and became intertwined in both theaters of fighting those numbers increased exponentially from 13,274 in 1942 to 39,723 in 1943, 70,576 in 1944, and finally 90,635 in 1945.⁵

The enhanced ability of America's military medical services during World War II was one of the keys to eventual victory on both fronts. Advances in medicines including the widespread use of Sulfanilamide to clean wounds, synthetic medication like Atabrine to combat malaria, and the introduction of Penicillin to stave off infection greatly assisted the members of the medical corps in treating patients in the field. In the wake of the First World War considerable advancements were made in medical specialties related to the treatment of battlefield traumas such as Burn Medicine, Neurosurgery, Thoracic Surgery, and Orthopedics helping to return injured soldiers and sailors to duty and substantially improving death rates among casualties from earlier conflicts. For example the rate of deaths from chest, head and abdominal wounds was 65 percent lower in World War II than World War I. Of particular note were modern advances that allowed for blood transfusions in the field including procedures for separating plasma from blood and even reducing that plasma to powder form. However, these advances in medicine meant little without a way to deliver them to the forces scattered around the globe.⁶

Perhaps the greatest achievement of the US Navy Medical Corps during World War II was the ability to provide quick treatment to casualties in the field through a network of mobile field hospitals and to then triage and evacuate casualties to an appropriate facility. Longer term treatments were provided in hospital ships and advance-base hospitals overseas or continental hospitals in the United States. Wounded sailors and marines were evacuated to treatment facilities that corresponded to the level of rehabilitation necessary for recovery. Simpler wounds were treated at or near the front and more complex cases evacuated to continental base hospitals in the United States. Medical expertise was provided at every level of this network of treatment requiring a high number of hospital corpsmen and nurses. Between 1941 and 1945 the Naval Hospital Corps grew from a force of just under 4,000 to greater than 132,000 personnel. The knowledge of these medical technicians reduced outbreaks of disease and allowed for treatment of fighting forces prior to and during evacuation procedures. Equally impressive was the Navy's ability to deliver medical supplies and complete mobile hospitals to the medical corps spread around the world. Two medical supply depots in the continental United States (Brooklyn and Oakland) supplied eight medical storehouses around the country including one in Charleston for the Sixth Naval District.

By the end of the Second World War there were forty-two naval hospitals and twelve naval convalescent homes in the United States alone, with additional hospitals overseas.⁷ Demobilization brought unique difficulties for military medicine as Americans everywhere attempted to return to their homes and pre-war lives. The Naval Hospital Corps faced the difficult situation of medical officers, corpsmen, and nurses wanting to conclude their service with the continued need to care for both existing patients in hospitals and additional casualties returning from extracontinental facilities.⁸ Although the cessation of fighting in 1945 limited the

⁵ US Department of the Navy, Bureau of Medicine and Surgery. The History of the Medical Department of the United States Navy in World War II, Volume 1. p. 1 & 13.

⁶ Navy BUMED, History of Medical Department in World War II, Vol. 1. p. v-vii.

"Blood Plasma is Reduced to Powder for Use at Sea." News & Courier, October 15, 1943.

⁷ Navy BUMED, History of Medical Department in World War II, Vol. 1. p. 35.

⁸ US Department of the Navy, Bureau of Medicine and Surgery. The History of the Medical Department of the United States Navy, 1945-1955. p. 15-20.

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number of additional cases from combat, continental hospitals continued to experience high patient loads for many years as rehabilitation treatments continued and as forces were brought back from the front. In response to medical personnel shortages during demobilization a massive reorganization took place in 1949 with passage of the Army-Navy Medical Service Corps Act. The act released commissioned medical officers from hospital corps duty and created a new set of training and classifications in order to provide the necessary standing medical personnel to care for both active military and veterans. This permanent commitment to a medical corps and a system of medical hospitals allowed for the treatment of medical cases from later conflicts in Korea and Vietnam without major facility improvements to continental hospitals.⁹

History of Charleston Naval Hospital

Some form of medical treatment facility has always existed to support activities at the Charleston Navy Base since the Charleston Navy Yard was established in 1900. In 1902, the same year the base was officially authorized, the Bureau of Medicine and Surgery purchased nearly 100 acres of land on the northwest side of the Navy Yard that was set aside as a hospital reservation. Despite this purchase there was no building on the reservation until the First World War. Initially medical care was provided to base employees in tents until a dispensary¹⁰ building was opened in 1908.¹¹ This dispensary building functioned as the routine medical service for Navy Base employees and stood until the 1960s. Shipbuilding progressed at the Navy Yard far less quickly than what had been envisioned, however the dispensary gradually grew with a series of additions to the structure eventually taking it to a 28-bed capacity. Even though the number of medical cases increased during these early years the hospital reservation site remained empty and in 1915 twenty-three acres of the original reservation were transferred to the Marine Corps to establish a camp on the base.¹²

The first hospital would not be erected and commissioned on the base until 1917, when American entrance into World War I necessitated construction of an emergency hospital. A training camp for the Navy which housed 5,000 recruits was started in that year on the west side of the base property. The number of medical visits rose sharply from the camp's presence and the increased number of ships arriving into Charleston for shore leave and for repairs from maritime battles in the Atlantic. Five one-story treatment wards were constructed with each one able to hold 42 patients. They were placed on the highest ground of the hospital reservation in nearly the same location as the extant hospital complex. While the new wards greatly increased the capacity to over 200 beds, there were routinely as many as 400 patients due to wounds and disease in the camp. Those that could not be housed in wards were treated in tents.¹³ Just over a year after opening an additional fourteen wooden wards were built to bring the total bed capacity to 1,000. At that time the hospital consisted of nineteen one-story wooden structures that housed administration, ward, and support facilities.¹⁴ Two residential buildings were also constructed during this period bringing the Medical Officers Quarters closer to the hospital reservation. Prior to this the medical officer lived in Quarters F of the Charleston Navy Yard Officer's Housing Historic District.¹⁵

With the end of hostilities in 1919, there was a dramatic reduction in the workforce at the Charleston Naval Shipyard and naturally fewer naval vessels needing repair and shore leave at the base. The hospital returned to its function prior to the war as a medical facility for navy personnel in the area and for use by yard employees and their dependants. In 1922 with fewer workers to serve, the wartime hospital site was

⁹ Hacala, p. AI-6 - AI-7.

¹⁰ The military distinguishes between a *dispensary*, which provides basic outpatient treatments, vaccines, and emergency care and a *hospital*, which houses patients for treating casualties or illness.

¹¹ Records of the Bureau of Medicine and Surgery (BUMED), 1812-1975, Record Group 52. Naval Hospital Histories, compiled 1955-1978. National Archives and Records Administration. Charleston Naval Hospital Historical Sketch, p. 1.

¹² *ibid*, p. 1

¹³ Kline, Grace. "The Naval Hospital at Charleston, South Carolina," American Journal of Nursing, May 1918. p. 668.

¹⁴ BUMED, Naval Hospital Histories, p. 2

¹⁵ Charleston Naval Base Report Map 1917, Redevelopment Authority.

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abandoned and most of the ward buildings demolished. Despite this move the hospital itself remained in commission with all functions and medical officers relocated back in the older dispensary building. A few of the temporary hospital wards were moved next to the dispensary building to bring the regular capacity of the hospital to fifty-seven beds.¹⁶

Throughout the 1920s and early 1930s, the Navy presence in Charleston was curtailed. The federal government threatened to close the base numerous times but intervention from state lawmakers kept the shipyard open at a much reduced level. In 1933, a contract for building gunboats kept the shipyard running and during the 1930s a series of public work projects supported by federal government New Deal programs expanded the facilities of the Navy Base. Between 1936 and 1939 the number of shipyard employees nearly doubled from 1,288 workers to nearly 2,500 workers at the close of the decade.¹⁷

The growing number of shipyard employees meant a need for additional hospital beds to care for sick or injured workers, and in early 1940 groundwork started for a new H-shaped emergency ward along Turnbull Avenue.¹⁸ An increased workforce in the shipyard and supporting institutions meant a larger command structure. By early 1941 additional housing for seventeen naval officers was completed south of Turnbull Avenue. The new housing consisted of eight duplex units joined by garages and one single unit planned in an area of the reservation separating officers from other navy personnel. Like other officers' quarters on the base, six of the new duplexes were arranged along curvilinear streets and faced in different directions, giving them a more picturesque appearance while two of the duplexes and the single residence were placed along Marine Avenue and Commissary Street.¹⁹

With the new projects, Charleston's Navy Base was seen as an important asset for the Atlantic fleet looking to secure a presence in the southern Atlantic and Caribbean. Planning started as early as February 1940 for a permanent hospital facility that would accommodate 200 patients. The Works Progress Administration provided nearly one million dollars to construct the new Charleston Naval Hospital and work commenced on October 1, 1940. A September 1940 article in the *News & Courier* announcing construction justified the plans and showed the mounting fear among Americans as war continued in Europe:

...[T]here are many possible emergencies during which the navy would need far more hospital space than now is being provided. For example, one battle-scarred cruiser could bring in enough wounded to tax all the facilities that would be available at Charleston's hospitals, naval and civilian combined.²⁰

Construction of the new concrete and terracotta block hospital progressed with each of the ten permanent buildings (NH45-54) completed one unit at a time. The majority of the construction for the new hospital was completed prior to the bombing of Pearl Harbor in December 1941 allowing it to be completed and commissioned for service on April 13, 1942 just four months after America's entry into World War II.²¹

The new hospital complex was modern in every way. Its plan provided different medical specialties with their own distinct sections of the complex, a centralized subsistence building, a consolidated administrative building and a central courtyard providing a recreation area and plenty of natural light to all areas of the buildings. The hospital provided state of the art equipment for all fields, including an operating suite, an x-ray department, and spaces and equipment for the emerging field of physiotherapy and rehabilitation. Architecturally the building

¹⁶ BUMED Record Group 52. Charleston Naval Hospital Historical Sketch, p. 2

¹⁷ Hamer, Charleston Reborn, p. 21-24.

¹⁸ This would later be used as a staff residence and recreation building.

¹⁹ Charleston Navy Base Report Map dated June 30, 1941

²⁰ "Naval Hospital Work Start Set." News & Courier, September 21, 1940.

²¹ BUMED Record Group 52. Charleston Naval Hospital Historical Sketch, p. 3.

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included modern materials throughout, including glass block and terrazzo floors near the main entrance and tile floors and walls throughout the buildings for sanitary reasons.

To support the new treatment facility a Nurses' Quarters (NH61), Corpsmen Quarters (demolished), and water tower (demolished) were built just to the east of the main hospital complex. The commanding officer and executive officer of the new hospital utilized the existing World War I era bungalows (Quarters 1 and 2) at the northwest corner of the hospital reservation. Some medical officers were also housed in an existing L-shaped quarters at the northwest corner of Avenue H and Turnbull (demolished) which had three living units. However two new single family quarters were built west of the hospital complex on the west side of Avenue H for pharmacy officers (Building 762 and 763). A new barracks for pharmacist mates (demolished) was also situated west of the main hospital complex on the east side of Avenue H.

The new hospital facility was a great leap forward for support of the base. However, even with the improvements, Charleston Naval Hospital was throughout the Second World War one of the smallest continental hospitals in terms of the number of beds. This was due in large part to the naval command area that it served, the Sixth Naval District, which covered the southern part of the Atlantic Ocean and the Caribbean. For this reason and due to its geographical position most of the patients received at Charleston had been engaged in fighting in the Atlantic and during amphibious landing missions in Europe. Like every naval hospital during mobilization, the number of casualties expected with the American declaration of war mandated additional space. Even before completion of the new hospital complex planning had commenced for a wave of additional facilities to be incorporated on the hospital reservation as the country mobilized. During 1942 the hospital treatment facilities expanded with the addition of ten temporary wards which increased the bed capacity at the Charleston Naval Hospital from 263 beds to 672 beds.²² These temporary wards were placed alongside the subsistence building (NH46) and to the north of the permanent wings. The ten wards were essentially four one-story H-shaped buildings and two one-story single wings connected to the permanent hospital by single-story corridors. The H-shaped plan was employed by the Navy to quickly and efficiently construct treatment wards at nearly every naval hospital facility during the Second World War.²³

Support and residential buildings were added during 1942 and 1943 as population increased at the hospital. In 1942, two new medical officer houses were constructed north of the main hospital complex between Avenue F and Avenue H that would become the Commanding Medical Officer's Quarters (Building 759) and the Executive Officer's Quarters (Building 758). The two buildings are nearly identical two-story rectangular houses with concrete block walls painted white and a hipped roof covered with red asphalt shingles. Building 759 is distinguished, however, as the senior officers' house with a two-story portico on the south side while Building 758 has just a one-story porch on the same side.²⁴

Residential improvements were also made during this second stage of building activities during World War II that indicate a change in the workforce at the Charleston Naval Hospital. An addition which doubled the size of the Nurses Quarters (NH61) was completed in early 1943 and an entirely new building at the corner of Avenue D and Turnbull Avenue (demolished) was constructed to house participants in the Navy's new Women Accepted for Volunteer Emergency Service, or WAVES, program. The program allowed the Navy to accept women into active service particularly to fill roles at continental Navy facilities that had been left by sailors sent overseas. The first group of fifteen WAVES at the Charleston Naval Base reported for duty at the Naval Hospital on July 8, 1943. Their duties extended to most every activity of the typical hospital corpsman including "making beds, caring for wounded and sick sailors, operating X-ray machines, preparing proper diets, driving

²² Although planned to house 200 patients, the main hospital's permanent wards had an emergency capacity of 263 when beds were placed at six foot intervals.

²³ BUMED Record Group 52. Charleston Naval Hospital Historical Sketch, p. 3
Navy BUMED, History of Medical Department in World War II, Vol. 1. p. 1-17.

²⁴ Charleston Navy Base Report Map dated June 30, 1943.

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ambulances, and administering doctor's machines." WAVES played a key role in providing assistance at the Charleston Naval Hospital and to Navy facilities throughout the world.²⁵

In early 1943, a Medical Supply Storehouse (NH68) was constructed to the east of the main hospital complex with a modern utilitarian appearance setting it apart from the treatment and residential buildings at the hospital. NH68 served an important function for the Navy Medical Corps operational chain of command by receiving medical supplies from the Medical Supply Depot in Brooklyn and storing, sorting, and distributing those supplies to Navy facilities around the world, particularly to the Sixth Naval District. When it was put in service, NH68's large rolling overhead doors on the south side of the building opened on to railroad tracks so that pallettes of goods could be loaded directly from or to railroad cars. This building was also used to store and process blood into plasma and powdered forms for shipment to Navy detachments outside of the United States.²⁶

The final phase of building at the Charleston Naval Hospital took place in late 1944 and early 1945 which provided additional accommodations for patients at the hospital. In late 1944 ground was broken on NH62, the Recreation Building just to the east of the main hospital complex. The building provided an opportunity for both patients and staff to get away from their treatment and work areas. It also gave the hospital new offices for some of the welfare functions and auxiliary services that occupied much needed space in the main hospital complex. NH62 was essentially two structures joined together; the 564 person auditorium for stage shows and movies, and the large recreation building with a snack area, offices, library, store, hobby room, barber shop, and post office. Begun in September 1944, the building was constructed by the Simons-Mayrant Company of Charleston and opened in January 1945.²⁷ At nearly the same time, to the south of Turnbull Avenue, NH55 was being erected to provide additional bed space for naval officers. The building was constructed by the companies C.A. Thrasher and R.S. Cresswell, both of Greenville, and completed by January of 1945. This Sick Officers' Quarters Annex provided more luxurious accommodation for injured officers than the ward in NH48. The building featured thirty-seven separate rooms for officers arranged as suites with a shared bathroom between each. With its own nurse and doctor offices, exam room, kitchen, mess areas and lounge, officers receiving treatment were clearly set apart from the enlisted men housed in the main hospital complex.²⁸

After the conclusion of World War II in the summer of 1945, the Charleston Naval Hospital continued to keep patients in the wards during demobilization. As the number of casualties being treated decreased, the ten temporary hospital wards on the north side of the main hospital complex were gradually closed. With little use during peacetime these ten frame buildings were demolished in the early 1960s. However, the Second World War left the country with many injured veterans that would need regular medical care throughout their lives. Additionally, the US Navy and the Naval Bureau of Medicine and Surgery realized the need to maintain a standing force during the Cold War to police the world. The Charleston Naval Hospital continued to serve sailors, workers at the base, and their dependents in the World War II era hospital buildings until a new high-rise hospital was completed in 1972 on nearby Spruill Avenue. As the hospital functions left these buildings, the Naval Sixth District Command took over the space for their administrative offices until the US Navy decommissioned the base in the 1990s.

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²⁵ "15 Enlisted WAVES Report for Duty at Navy Hospital." News & Courier, July 8, 1943.

²⁶ "Blood Plasma is Reduced to Powder for Use at Sea." News & Courier, October 15, 1943; Reed, Mary Beth and Staci Richey. "To Meet a Great Need: Building NH68 at the Charleston Naval Hospital and World War II." Final Report Prepared by New South Associates (Columbia, SC), 2009.

²⁷ "Navy Yard to Have \$200,000 Hospital Recreation Building." News & Courier, September 12, 1944.

²⁸ "Work on \$90,000 Additional to Naval Hospital is Begun." News & Courier, August 24, 1944.

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"Naval Hospital, Completed 10 Years Ago, Is Third to Serve Charleston Naval Shipyard." News & Courier, May 13, 1952.

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"Naval Hospital Work Expanded." News & Courier, February 24, 1943.

"Naval Hospital Work Start Set." News & Courier, September 21, 1940.

"Navy Yard to Have \$200,000 Hospital Recreation Building." News & Courier, September 12, 1944.

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Photographs of the Bureau of Yards and Docks

Previous documentation on file (NPS):

☐ preliminary determination of individual listing (36 CFR 67 has been requested)

☐ previously listed in the National Register
☐ previously determined eligible by the National Register
☐ designated a National Historic Landmark
☐ recorded by Historic American Buildings Survey # _____
☐ recorded by Historic American Engineering Record # _____
☐ recorded by Historic American Landscape Survey # _____

Primary location of additional data:

☒ State Historic Preservation Office
Other State agency:
☒ Charleston Naval Base Redevelopment Authority
Federal agency:
☒ US Department of the Navy
☐ Local government
☐ University
☐ Other
Name of repository: _____

Historic Resources Survey Number (if assigned): _____

10. Geographical Data

Acreage of Property 33.73 acres

(Do not include previously listed resource acreage.)

UTM References

(Place additional UTM references on a continuation sheet.)

1 17 595540 3636840
Zone Easting Northing

3 17 596080 3636680
Zone Easting Northing

2 17 595960 3636940
Zone Easting Northing

4 17 595800 3636040
Zone Easting Northing

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

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The boundary of the Naval Hospital Historic District begins at the northeast corner of the intersection of St. John's Avenue and Turnbull Avenue. The boundary proceeds north, following the Naval reservation boundary until it reaches a point 20 ft. north of building 762. The boundary proceeds east until it intersects with Avenue H. The boundary continues along the west side of Avenue H until the road curves east. The boundary then proceeds along the walkway located west of Building 761 to include Building 7761 in the historic district, until the boundary intersects with Avenue F. The boundary follows the south side of Avenue F until it reaches the parking lots located east of Building NH46. The boundary proceeds along the east and north sides of the parking lots, excluding Building 807 from the historic district. The boundary proceeds east along the south side of Parsons Avenue until it reaches the northeast corner of Building NH68. The Boundary turns south along the east elevation of Building NH68 to include Building NH68 in the historic district, and continues southward until it intersects with Turnbull Avenue. Building NH1137 is excluded from the historic district. The boundary proceeds along the north side of Turnbull Avenue until it reaches a point 20 ft. east of the northeast corner of Building NH55. The boundary turns south until it reaches a point 20 ft. south of the southeast corner of Building NH55. The boundary turns west until it intersects Avenue G (excluding Building 777). The boundary proceeds along the east side of Avenue G, jutting north to include Building M-3A, until it intersects with Second Street. The boundary turns west along Second Street until it reaches a point 10 ft. west of Building 765. The boundary turns south in a straight line until it reaches Marine Avenue. The boundary follows the south side of Marine Avenue until the avenue turns north. The boundary turns south in a straight line until it reaches a point located 10 ft. south of the southeast corner of Building M-6. The boundary turns west, including Buildings M7-M6 and M9-M8 in the historic district, until it reaches a point 10 ft. west of the southwest corner of Building M-9. The boundary turns north in a straight line until it intersects Second Street. The boundary follows the north side of Second Street until it reaches the south east corner of Building 780 and follows the east, north, and west footprint of Building 760, excluding it from the historic district. The boundary proceeds along the north side of Second Street until it intersects Avenue H. The boundary proceeds along the east side of Avenue H until it intersects Turnbull Avenue. The boundary proceeds along the north side of Turnbull Avenue until it reaches the northeast corner of the intersection of Turnbull and St. John's Avenue.

Boundary Justification (Explain why the boundaries were selected.)

The boundaries of the Charleston Naval Hospital Historic District encompass the extant buildings and structures that functioned as the Charleston Naval Hospital during World War I and World War II. These boundaries include medical treatment facilities, supply, storage and recreational buildings, and both officer and multiple unit staff housing. These boundaries were first determined by the US Navy in a report identifying historic resources at the Charleston Naval Base during closure in 1995.

11. Form Prepared By

name/title Richard Sidebottom, Architectural Historian

organization Sidebottom Preservation

date June 2010

street & number 74 Hagood Avenue

telephone (843) 530-8788

city or town Charleston

state SC

zip code 29403

e-mail richard@sidebottompreservation.com

Charleston Naval Hospital Historic District
Name of Property

Charleston County, SC
County and State

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**
- **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: Charleston Naval Hospital Historic District
City or Vicinity: North Charleston
County: Charleston **State:** South Carolina
Photographer: Richard Sidebottom
Date Photographed: August 2009/June 2010

Description of Photograph(s) and number:

- 1 of 37:** Main Entrance of Naval Hospital Complex looking North
Building NH45, August 2009
- 2 of 37:** South Façade of Naval Hospital Complex looking Northwest
Building NH45, August 2009
- 3 of 37:** East Façade of Subsistence Building looking East
Building NH46, June 2010
- 4 of 37:** Northwest Corner of Officer's Ward looking East
Building NH48, August 2009
- 5 of 37:** Photo of NH48, NH50, NH52
June 2010
- 6 of 37:** Northwest Corner of Neuro-Psychiatric Ward looking East
Building NH52, August 2009
- 7 of 37:** Southeast Corner of Surgical and Emergency Ward looking Northwest
Building NH49, August 2009
- 8 of 37:** Northeast Corner of Dependents Ward looking West with NH51 and NH49 to the south

Charleston Naval Hospital Historic District
Name of Property

Charleston County, SC
County and State

Building NH53, June 2010

- 9 of 37:** North Façade and Main Entrance of Sick Officer's Quarters Annex looking South
Building NH55, August 2009
- 10 of 37:** Northwest Corner of Sick Officer's Quarters Annex looking Southeast
Building NH55, August 2009
- 11 of 37:** Southeast Corner and Main Entrance of Nurse's Quarters looking Northwest
Building NH61, August 2009
- 12 of 37:** Southeast corner of Medical Supply Storehouse looking Northwest
Building NH68, June 2010
- 13 of 37:** West Façade and Main Entrance of Recreation Building looking East
Building NH62, August 2009
- 14 of 37:** Northwest Corner and Main Entrance of Medical Officer's Quarters looking Southeast
Building 758, June 2010
- 15 of 37:** South Facade of Medical Officer's Quarters looking North
Building 758, June 2010
- 16 of 37:** South Facade of Medical Officer's Quarters looking North
Building 759, June 2010
- 17 of 37:** Northeast Corner and Main Entrance of Medical Officer's Quarters looking Southwest
Building 759, June 2010
- 18 of 37:** Detail of Main Entrance Doorway on North Façade
Building 759, June 2010
- 19 of 37:** Northeast Corner and Main entrance of Quarters #2 looking Southwest
Building 760, June 2010
- 20 of 37:** Southwest Corner of Quarters #2 looking Northeast
Building 760, June 2010
- 21 of 37:** Inside Front screened porch and North Facade looking West
Building 760, June 2010
- 22 of 37:** Northeast Corner and Main entrance of Quarters #1 looking Southwest
Building 761, August 2009
- 23 of 37:** Northwest Corner of Garage looking Southeast
Building NH1418, August 2009
- 24 of 37:** Northwest Corner of Garage looking Southeast
Building NH1414, August 2009
- 25 of 37:** South Façade and Main Entrance of Pharmacy Officer's Quarters looking North
Building 762, June 2010

Charleston Naval Hospital Historic District
Name of Property

Charleston County, SC
County and State

- 26 of 37:** Northeast Corner of Pharmacy Officer's Quarters looking Southwest
Building 762, June 2010
- 27 of 37:** Southwest Corner and Kitchen Porch of Pharmacy Officer's Quarters looking Northeast
Building 762, June 2010
- 28 of 37:** North Façade and Main Entrance of Pharmacy Officers Quarters looking South
Building 763, June 2010
- 29 of 37:** Driveway and Front to Building II-HH looking Northeast
Building II-HH, August 2009
- 30 of 37:** Driveway and Front to Building FF-GG looking Northeast
Building FF-GG, August 2009
- 31 of 37:** South and East sides of building BB-CC looking Northwest
Building BB-CC, August 2009
- 32 of 37:** South and East sides of building BB-CC looking Northwest
Building BB-CC, August 2009
- 33 of 37:** South side of Garage and Storage Building M3A looking North
Building M-3A, August 2009
- 34 of 37:** Southeast side of Garage and Storage Building M2A looking Northwest
Building M-3A, August 2009
- 35 of 37:** South Façade of Building M5 looking North
Building M-5, August 2009
- 36 of 37:** Northwest Corner of Building M5 looking South
Building M-5, August 2009
- 37 of 37:** North Façade of Building M9-M8 looking Southwest
Building M9-M8, August 2009

Property Owner:

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

name Multiple Owners (see attached continuation sheets)

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.

Charleston Naval Hospital Historic District

Name of Property

Charleston County, SC

County and State

Property Owners

Parcel ID #: 4000000074
Acreage: 22.64
Owner: Noisette Company LLC
Address: 1360 Truxtun Avenue, Suite 200
North Charleston, SC 29405-2046

Parcel ID #: 4000000045
Acreage: 33.73
Owner: Navy Yard at Noisette LLC
Address: 1360 Truxtun Avenue
North Charleston, SC 29405-2043

Parcel ID #: 4000000048
Acreage: 38.17
Owner: Navy Yard at Noisette LLC
Address: 1360 Truxtun Avenue
North Charleston, SC 29405-2043

Parcel ID #: 4000000066
Acreage: 1.66
Owner: NH68SC LLC
Address: 284 Beresford Creek Street
Daniel Island, SC 29492-7518

Parcel ID #: 4000000164
Acreage: 0.94
Owner: Coleman-Snow Consultants LLC
Address: 2442 Remount Road
North Charleston, SC 29406

Parcel ID #: 4000000183
Acreage: 0.33
Owner: Noisette Company LLC
Address: 1360 Truxtun Avenue, Suite 200
North Charleston, SC 29405-2046

Parcel ID #: 4000000184
Acreage: 0.38
Owner: Noisette Company LLC
Address: 1360 Truxtun Avenue, Suite 200
North Charleston, SC 29405-2046

Charleston Naval Hospital Historic District
Name of Property

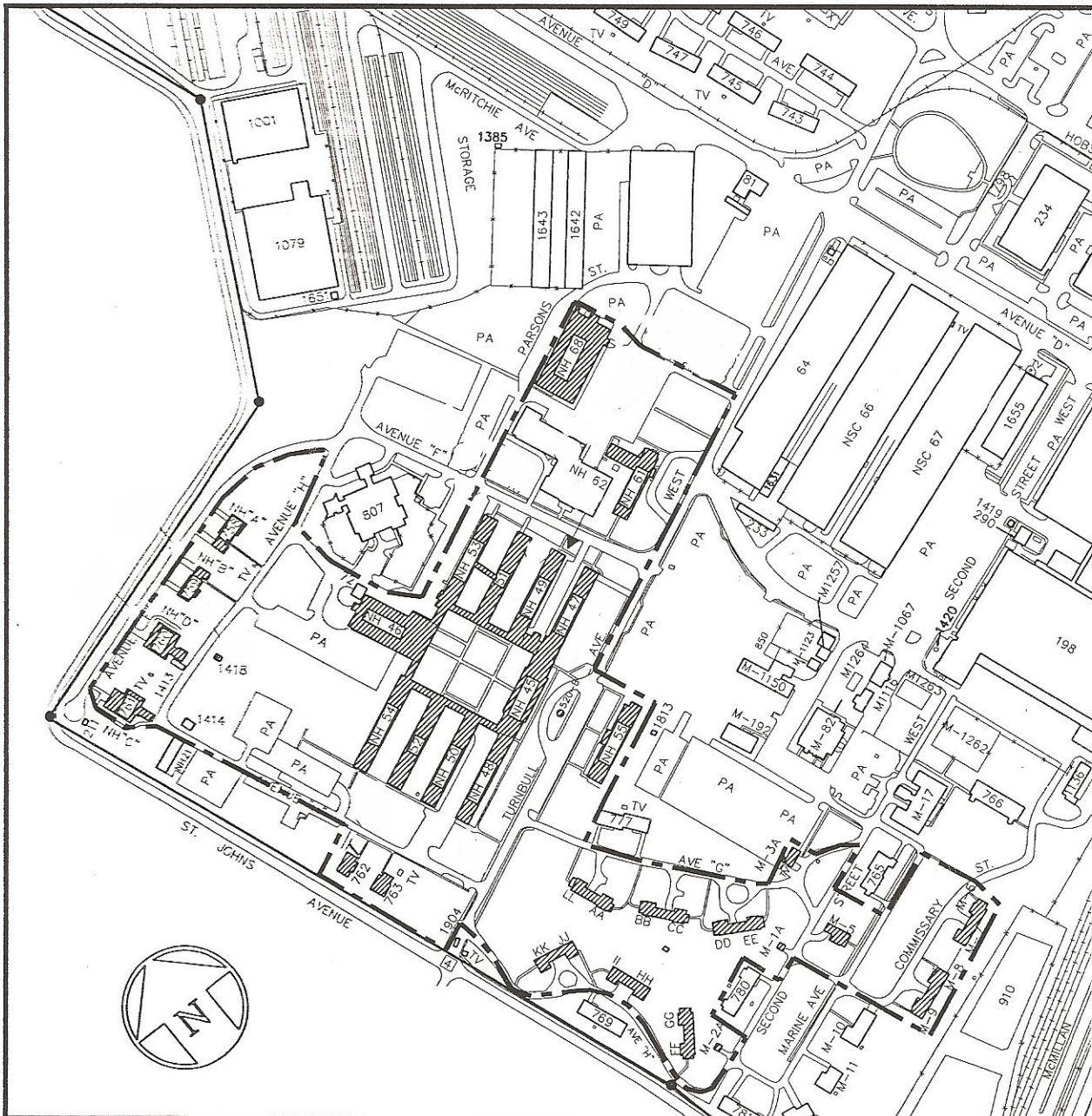
Charleston County, SC
County and State

Parcel ID #: 4000000185
Acreage: 0.43
Owner: Noisette Company LLC
Address: 1360 Truxtun Avenue, Suite 200
North Charleston, SC 29405-2046

Parcel ID #: 4000000186
Acreage: 0.45
Owner: Noisette Company LLC
Address: 1360 Truxtun Avenue, Suite 200
North Charleston, SC 29405-2046

Parcel ID #: 4000000187
Acreage: 0.22
Owner: Noisette Company LLC
Address: 1360 Truxtun Avenue, Suite 200
North Charleston, SC 29405-2046

Parcel ID #: 4000000188
Acreage: 0.21
Owner: Noisette Company LLC
Address: 1360 Truxtun Avenue, Suite 200
North Charleston, SC 29405-2046



NAVAL BASE CHARLESTON NAVAL HOSPITAL HISTORIC DISTRICT

KEY:



CONTRIBUTING
PROPERTY



PROPOSED NATIONAL
REGISTER HISTORIC
DISTRICT BOUNDARY

LOCATION:





Charleston County

Copyright 2004




Charleston County GIS

4045 Bridge View Drive


North Charleston, SC 29405-7464

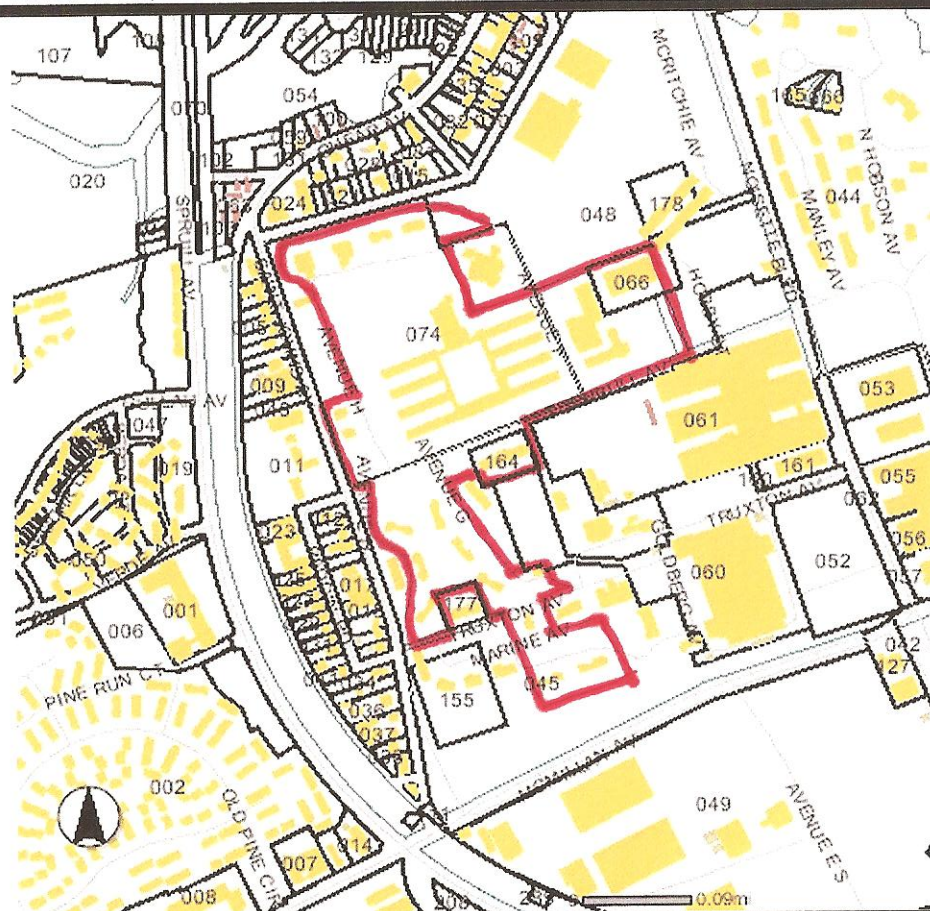
Legend

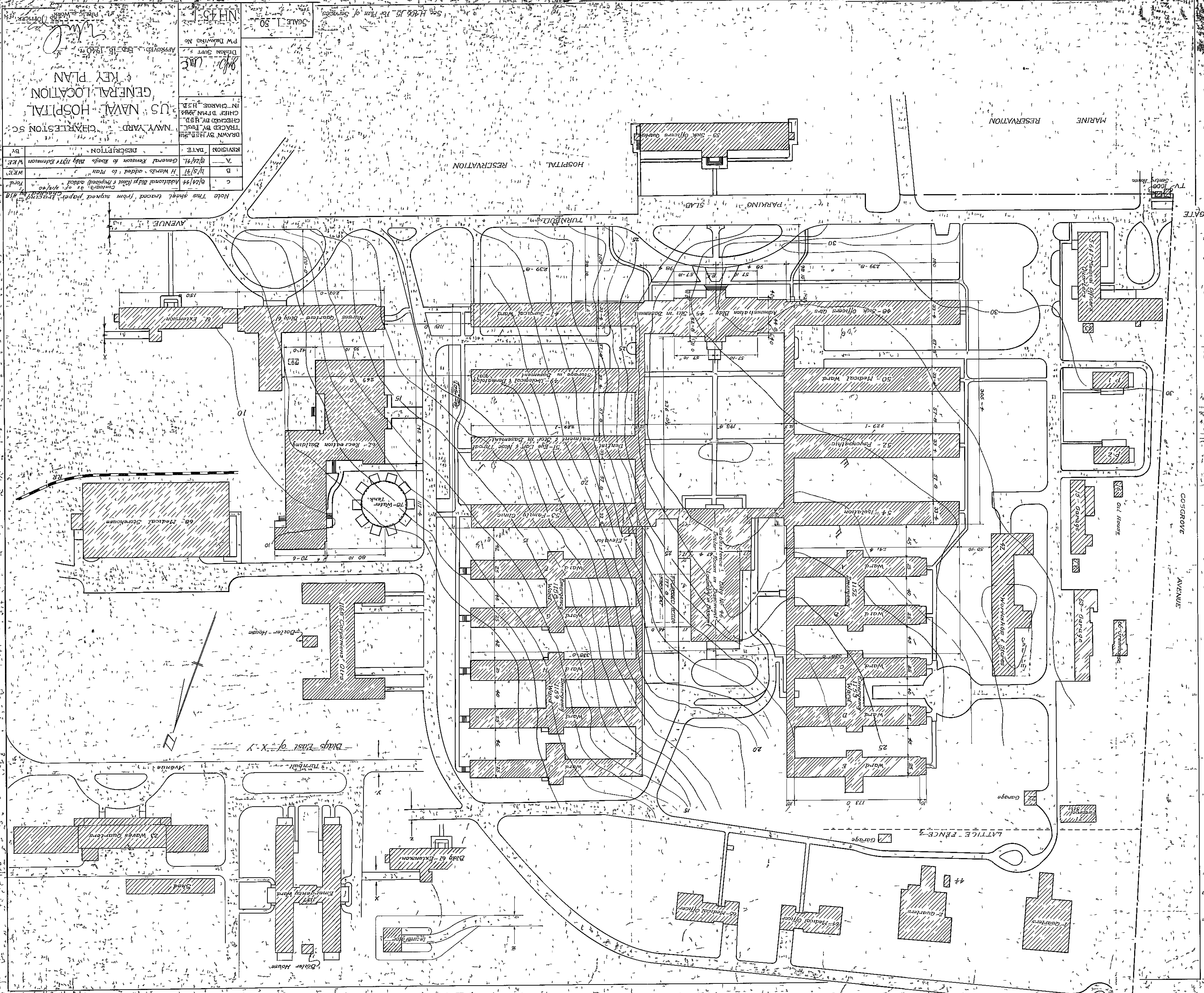
Mar 2001 Buildings

-  Building
-  Shed/Garage
-  Under Construction
-  Manufactured Housing

 Streets/Roads

 Parcels





NAVAL HOSPITAL HISTORIC DISTRICT NAVAL BASE CHARLESTON

	ZONE	EASTING	NORTHING
1.)	17	595540	3636840
2.)	17	595960	3636940
3.)	17	596080	3636680
4.)	17	595800	3636040

