

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.

1. Name of Property

DRAFT

Historic name: Doctors House

Other names/site number: N/A

Name of related multiple property listing: N/A

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

2. Location

Street & number: 1601 West Mountain Street

City or town: Glendale State: California County: Los Angeles

Not For Publication: Vicinity:

3. State/Federal Agency Certification

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

I hereby certify that this ___ 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 ___ meets ___ does not meet the National Register Criteria. I recommend that this property be considered significant at the following level(s) of significance:

___ national ___ statewide ___ local

Applicable National Register Criteria:

___A ___B ___C ___D

<p>_____</p> <p>Signature of certifying official/Title:</p> <p>_____</p> <p>State or Federal agency/bureau or Tribal Government</p>	<p>_____</p> <p>Date</p>
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<p>In my opinion, the property ___ meets ___ does not meet the National Register criteria.</p>	
<p>_____</p> <p>Signature of commenting official:</p> <p>_____</p> <p>Title:</p>	<p>_____</p> <p>Date</p>
<p>_____</p> <p>State or Federal agency/bureau or Tribal Government</p>	

Doctors House
Name of Property

Los Angeles, California
County and State

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.)

- Private:
- Public – Local
- Public – State
- Public – Federal

Category of Property

(Check only one box.)

- Building(s)
- District
- Site
- Structure
- Object

Doctors House
Name of Property

Los Angeles, California
County and State

7. Description

Architectural Classification

(Enter categories from instructions.)

LATE VICTORIAN: Queen Anne

Materials: (enter categories from instructions.)

Principal exterior materials of the property: concrete, wood, brick

Narrative Description

(Describe the historic and current physical appearance and condition of the property. Describe contributing and noncontributing resources if applicable. Begin with a **summary paragraph** that briefly describes the general characteristics of the property, such as its location, type, style, method of construction, setting, size, and significant features. Indicate whether the property has historic integrity.)

Summary Paragraph

The Doctors House is a two-story, Queen Anne style building with Eastlake influences in Glendale. Originally a single dwelling, it was repurposed as a museum. Built circa 1888, the building is constructed of wood frame and has an irregular plan and asymmetrical massing. The roof is steeply pitched with hipped and gabled volumes and is sheathed in textured concrete tiles that mimic the appearance of wood shingles. A brick chimney projects from the roof. Exterior walls are clad in horizontal wood lap siding, with wood beadboard used as an accent material. Porches with wood details are located at three corners of the building. Ingress is provided by paneled, glazed wood doors; some have transoms, and the primary door has stained glass details. Fenestration consists of wood double hung, casement, and pocket windows; some are arranged as canted bays. The building is replete with milled wood decorative details including panels, brackets, spindles, fretwork, pendants, finials, and flat casing trim. Most interior spaces have been restored to their original circa 1888 condition and feature wide-plank hardwood floors, wallpaper and beadboard walls, and extensive wood trim. In 1980, to avert demolition, the building was moved from a residential location in central Glendale to a public park in northwest Glendale. Once moved, most alterations—almost all confined to interior spaces—were reversed. The house retains integrity of design, materials, workmanship, feeling, and association.

Doctors House
Name of Property

Los Angeles, California
County and State

Narrative Description

Setting

The Doctors House was constructed circa 1888 as a two-story, Queen Anne style single dwelling with Eastlake influences, at 921 E. Wilson Avenue in central Glendale.¹ To avert demolition, the building was moved in 1980 to Brand Park, a thirty-one-acre public park at the foot of the Verdugo Mountains in northwest Glendale. Since restoration was completed in 1984, the building has operated as a house museum. The museum occupies a somewhat peripheral location near the northwest corner of the park. Its setting is lushly landscaped with gently sloping lawns, mature trees, and manicured shrubs and hedges. Set within this verdant landscape is a detached wood-and-steel gazebo constructed in 1999 as a complement to the main house. The gazebo is located outside the nominated boundary.

Exterior

The building is oriented southward. It has an irregular footprint and complex massing, is constructed of wood frame, and sits on a concrete foundation. Portions of the foundation walls are finished in red bricks that are laid in a running bond and capped by a row of angled soldier bricks. The original foundation bricks were salvaged and reinstalled when the building was relocated in 1980. Exterior walls are primarily clad in horizontal wood lap siding; wood bead board is also used as a finish material at porch ceilings and in detail areas.

The roof is steeply pitched and complex in form. It is composed of multiple volumes including gabled, hipped, and shed sections, all of which are sheathed in textured concrete tiles that simulate the appearance of wood shingles while being fire resistant for use in high fire-risk areas. Roof features include a hipped tower, gabled dormers, molded eaves, and finials. Projecting from the roof is a brick chimney capped by a corbeled pot. These bricks were salvaged from the original chimney, which collapsed during the 1980 move.

The primary (south) façade is three bays wide and asymmetrically composed. It contains the primary entrance, which is positioned off-center and is approached by a stoop comprising wood steps, wood cheek walls, and metal handrails. The stoop is surmounted by a bracketed hood. From the stoop, ingress is provided by a glazed, paneled wood door with stained glass details and a glazed transom. East of this entrance, at the southeast corner of the building, is a porch with wood details including turned post supports, spindled rails, and arched lattice work known as moon gates. This porch is accessed through the interior parlor, via a south-facing pocket window that slides into the upper section of its frame and effectively functions as a door.

¹ There is no official record of the building's completion, so its precise date of construction is not known. Available documentation, extensive research conducted by The Glendale Historical Society, and visual observation of the building's architectural style and features indicate that it was likely constructed in 1888. Although Doctors' House is more grammatically correct, the apostrophe has been the subject of debate over time, and neither the city nor the historical society use the apostrophe in the property name.

Doctors House
Name of Property

Los Angeles, California
County and State

On the opposite (west) end of the primary façade is a second porch, located at the southwest corner of the building. This porch is approached by wood steps with wood cheek walls and metal handrails, and contains wood decorative details including turned post supports, spindled rails, and moon gates. Two additional entrances are accessed via the southwest porch. One, which faces south and opens into the kitchen, consists of a glazed paneled wood door with a glazed transom. The second, which faces west and opens into the dining room, consists of a solid paneled wood door with a glazed transom.

Located west of the southwest porch is a tertiary entrance that leads into rear utility areas. This entrance is approached by a small stoop comprising wood steps, wood cheek walls, and metal rails. Ingress is provided via a paneled wood door.

Fenestration on the primary façade is varied and consists of wood double hung, casement, and pocket windows with wood sills and surrounds. Several of the ground-floor windows are arranged as a canted bay and are surmounted by an indented panel frieze. Other notable features on the primary façade include an eclectic array of milled wood decorative details including indented panels, sawn brackets, fretwork, spindles, pendants, finials, and flat casing trim.

The east façade has a canted central bay with wood double hung windows. North of the canted bay are three wood pocket windows, which open onto an additional porch at the northeast corner of the building; the pocket windows slide up into their frames and effectively function as doors. When the rear bedroom was historically used as a medical office, this rear porch functioned as the waiting area, and the pocket windows functioned as the primary point of ingress to the medical office. The rear porch has wood details including a spindled post support, spindled rails, and moon gates. Other features on the east façade include wood casement windows in the lower gable end, a louvered vent in the upper gable end, and milled wood details.

The west and north façades are less articulated. Features on the west façade include wood double-hung and sliding windows, and a louvered vent in the gable end. A shed-roofed volume projecting from the west façade is a porch enclosure dating to 1908. The north (rear) façade features wood double-hung windows and decorative wood trim. At the north façade is an access point to a partially excavated basement level, which consists of two wood hatch-style doors.

Interior

Interior spaces are divided between two floors. The first floor contains the main reception spaces; secondary spaces including bedrooms, bathrooms, and a kitchen; and tertiary spaces that are used for storage. The second floor contains additional secondary and tertiary spaces.

The interior floorplan is compartmentalized, with most rooms opening directly into one another via paneled wood doors. Hallways and other interstitial spaces are minimal. Throughout the interior, doors and windows are generally framed by wood casings that are accentuated by rosettes and plinth blocks. Most interior hardware also appears to be original, as does a

Doctors House
Name of Property

Los Angeles, California
County and State

mechanical doorbell and a speaking tube, an early intercom system between the first and second floors. Interior spaces are decorated with period furniture, not original to the building, which dates to the Late Victorian period and complements the building's Queen Anne-Eastlake style.

First Floor

On the first floor, the primary door opens into a small entry vestibule, an intermediary space that provides ingress to the two primary reception spaces: a parlor and a dining room. The parlor occupies the east side of the first floor; the dining room occupies the south side. The parlor and dining room adjoin one another, separated by a wide-framed wood pocket door. Finishes in both rooms include wide-plank fir hardwood floors and period wallpaper with a decorative frieze incorporated into the paper design. Wood is also used extensively for baseboards, picture rails, and other trim elements. Other features in the parlor include a built-in wood window seat that frames the base of the canted window bay. Other features in the dining room include a built-in wood china cabinet, and a metal fireplace with a painted tromp l'oeil marble finish, a bracketed marble mantle, and a tile hearth. The parlor window seat and dining room china cabinet are in-kind reproductions of missing original features installed during the 1980s restoration.

The rear (north) wing of the first floor contains two bedrooms. The east bedroom was used as a medical office when doctors resided in the house. Both first-floor bedrooms have wide-plank fir floors, period wallpaper, and decorative wood trim. Each bedroom also has a small walk-in closet. The west bedroom features an attached bathroom with fir floors, period wallpaper accentuated by a wood beadboard wainscot, and enameled plumbing fixtures.

The kitchen is west of the west bedroom and dining room. Floors in the kitchen are finished in wide-plank fir boards; walls are finished in period wallpaper accentuated by a wood beadboard wainscot. On the north kitchen wall is a pantry with boxcar paneling and wood cabinets and shelves. The pantry contains a California cooler, an interior cabinet with open vents that allows outside air to cycle in and cool perishable items through the process of natural convection. On the west kitchen wall is another door that leads to a modern accessible restroom.

The far west end of the first floor contains a side porch enclosed in 1908, which houses tertiary spaces including a utility kitchen and rear vestibule. These spaces lack articulation, and feature fir floors and wood beadboard paneling on the walls and ceiling.

Second Floor

Originating from the dining room is a set of stairs to the second floor. The stairs are L-shaped, with wood risers and treads and wood handrails with turned balusters. The stairs were reconstructed to modern code requirements as part of the 1980s restoration. Stair walls are finished in wallpaper. At the top of the stairs is a small open vestibule that was historically used as a sewing nook. The vestibule/sewing nook has fir floors and painted walls and wood trim.

Doctors House
Name of Property

Los Angeles, California
County and State

The second floor contains two additional bedrooms, both of which are accessed via the vestibule/sewing nook. The first bedroom, located in the east portion of the second floor, is incorporated into the eaves and has sloped ceilings and alcoves that conform to the irregular shape of the roof. This bedroom includes a small adjoining room tucked into the east gable, historically used as a child's playroom. The second bedroom occupies the west portion of the second floor. Both upstairs bedrooms have fir floors, painted walls, painted wood trim, and walk-in closets.

The northwest corner of the second floor is occupied by an additional bathroom, accessed via both the vestibule/sewing nook and the master bedroom. Features in the upper bathroom include wood beadboard paneling on the walls and ceiling, fir floors rendered in a marbled painted finish known as spatter paint, and enameled plumbing fixtures.

Character-Defining Features

The Doctors House retains the following character-defining features:

Exterior

- Two-story height
- Irregular plan and asymmetrical massing
- Steeply pitched roof comprising hipped and gabled volumes and a squared tower
- Decorative roof features including molded eaves, dormers, and finials
- Brick chimney with a corbeled pot
- Horizontal wood lap siding, with wood beadboard accents
- Corner porches with spindled details and arched lattice work ("moon gates")
- Wood steps and cheek walls at porch approaches
- Paneled and glazed wood entrance doors, some with transoms
- Canted window bays
- Narrowly proportioned wood windows (double-hung, casement, and pocket sash)
- Profusion of milled wood decorative details

Interior

- Compartmentalized floor plan, with a lack of hallways and other interstitial spaces
- Wide-plank hardwood (fir) floors
- Spatter dash painted floor finish (second floor bathroom)
- Period wallpaper, some with decorative friezes incorporated into the design
- Wood beadboard wainscot in some interior spaces
- Extensive wood trim elements including baseboards, door and window casings, picture rails, and built-in casework and cabinetry
- Paneled wood interior doors, some with transoms

Doctors House
Name of Property

Los Angeles, California
County and State

Alterations

Various alterations were made to the house over time, most of which were confined to interiors and almost all of which were reversed when the building was restored by The Glendale Historical Society between 1980 and 1984. As part of this restoration, the building was restored to its original, circa 1888, appearance. Post-1888 alterations were reversed, with a few exceptions as noted in the following list. Original features that had been removed were replaced in-kind. Structural elements of the building were also carefully restored to their original conditions. When moved, the house was carefully placed so that its south-facing orientation and verdant setting were similar to the conditions that existed at its original location.

The building retains the following exterior alterations:

- Roofline modified on the west (side) and north (rear) façades to accommodate additional living space within the attic (1902)
- Gabled dormer added to the north façade, adjacent to an existing dormer (1902)
- Side porch enclosed on the west façade (1908)
- Building relocated (1980)
- Original wood screen doors removed (c. 1980)
- Original entrance door (missing at the time of relocation) replaced with a similar door salvaged from another Queen Anne style house (c. 1984)
- Original chimney (collapsed during the relocation) reconstructed using bricks salvaged from the original chimney (c. 1984)
- Metal handrails added to the south-facing entrances (embedded into the ground and physically detached from the house)

Interior spaces were remodeled, often many times, between the building's construction and relocation. Some rooms were re-programmed to accommodate new uses; some original doors and partitions were reconfigured; some original features (including the window seat in the parlor and the china cabinet in the dining room) were removed; and non-original floor and wall treatments were applied by various owners to suit their personal tastes.

Interior spaces were carefully researched and restored to their original appearance as part of the 1980s restoration completed by The Glendale Historical Society. As part of the restoration project, spaces were restored to their original configuration, inappropriate interior alterations were reversed, and original interior features and finishes that had been removed were replaced in-kind. A few interior alterations were retained during the restoration, and a few additional interior alterations were made to accommodate its use as a museum.

The building retains the following interior alterations:

- Unfinished attic converted to additional living space, and an interior staircase added to the dining room (c. 1896)
- Attic expanded to accommodate an additional bedroom and bathroom (c. 1902)

Doctors House
Name of Property

Los Angeles, California
County and State

- Original closets converted to indoor washrooms when the house was plumbed; these spaces are the first-floor and second-floor washrooms (c. 1908)
- California cooler added to the kitchen (c. 1910)
- Interior staircase reconstructed to meet modern-day code requirements (c. 1984)
- Accessible restroom added to the first floor (c. 1984)

Integrity

Relatively few alterations have been made to the building's exterior since its original construction. The two most substantial exterior alterations include modification of the roofline to accommodate an expanded attic (1902), and enclosure of an open porch on the west façade (1908). Neither alteration has compromised the original design intent of the building, modification of the roofline occurred within the period of significance and is consistent with the building's form and character, and the enclosed porch is located on a secondary façade with limited visibility. Key interior spaces are also largely intact as they were carefully researched and restored to their original condition. The building exudes a strong sense of time and place from its historical period, and it reflects the aesthetic values underpinning Queen Anne architecture as well as the Late Victorian period. The Doctors House retains integrity of design, materials, workmanship, feeling, and association—aspects of integrity paramount to conveying its architectural significance.

The building does not retain integrity of location since it was moved in 1980. The building also does not retain integrity of setting. Originally located on a corner lot in an established neighborhood in central Glendale, the building was moved to a verdant section of a city park at the base of the Verdugo Mountains. The loss of integrity of location and setting are less critical in the conveyance of architectural significance.

Doctors House
Name of Property

Los Angeles, California
County and State

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.)

- 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

Doctors House
Name of Property

Los Angeles, California
County and State

Areas of Significance
(Enter categories from instructions.)

ARCHITECTURE

Period of Significance
1888-1902

Significant Dates

1888
1896
1902

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

N/A

Cultural Affiliation

N/A

Architect/Builder

Unknown

Doctors House
Name of Property

Los Angeles, California
County and State

Statement of Significance Summary Paragraph (Provide a summary paragraph that includes level of significance, applicable criteria, justification for the period of significance, and any applicable criteria considerations.)

The Doctors House is eligible for listing in the National Register of Historic Places at the local level of significance under Criterion C in the area of Architecture. The building embodies distinctive characteristics of the Queen Anne style of architecture, with Eastlake influences, and the Late Victorian period. Characteristics of the Queen Anne style expressed in the building's design include its asymmetrical massing, complex roof with hipped and gabled volumes, horizontal wood lap siding, prominent corner porches, narrowly-proportioned wood windows, canted window bays, and a profusion of milled wood decorative details. Typical of Queen Anne style buildings, this building also incorporates some elements of the closely related Eastlake style, namely its squared roof tower and some of the exterior wood details including spindles, knobs, and newels. Together, these features clearly illustrate the aesthetic values underpinning the Queen Anne style as well as the Late Victorian period when the style was conceived. The building is also one of only two extant Queen Anne style buildings in Glendale and is therefore a rare surviving example of the community's early architectural heritage. The period of significance begins with construction circa 1888 through finishing the attic in 1896 and closes in 1902 with expansion of the attic. The attic expansion stayed true to the original architectural character of the house and is consistent with the tenets of the Queen Anne style. As a moved property significant for its architectural value—retaining enough historic features to convey its significance through integrity of design, materials, workmanship, feeling, and association—the Doctors House meets Criteria Consideration B: Moved Properties.

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

History of the Doctors House

The community of Glendale was founded in 1887, at the apex of a real estate boom in Southern California. That year, six local landowners jointly filed a subdivision map for a new 150-acre town site at the base of the Verdugo Mountains and platted a rectilinear grid of blocks and streets amid a backdrop of orchards and farms. About 300 residents lived in the nascent town.²

The Doctors House was built during this formative period of development. The building was constructed circa 1888 by E T. Byram, a developer who was part of the consortium of local landowners who had founded Glendale the previous year.³ The architect and builder are unknown. The house was constructed at the northwest corner of Third Street (later Wilson

² City of Glendale, "South Glendale Historic Context Statement," prepared by Historic Resources Group, Sept. 30, 2014, 35.

³ There are no records affirming the precise date of construction; however, city planning documents identify the approximate year of construction as 1888, which is consistent with the building's architectural style and appearance.

Doctors House
Name of Property

Los Angeles, California
County and State

Avenue) and Belmont Street, near what was then the center of town. It was built as a speculative house, with a single story of living space and an unfinished attic space.⁴

Little is known about the earliest residents of the house. Between 1896 and circa 1914, three medical doctors and a chemist who worked in the medical field owned and occupied the house in succession. They resided at the house with their families and worked from the premises, which effectively became a *de facto* doctor's office.⁵ The house became known as the Doctors House by about the 1950s; prior to then, the house does not seem to have had a formal name.⁶

The first physician to occupy the house was Dr. Charles Virgil Bogue, who purchased the residence in 1896. Bogue lived here with his wife and children and used one of the bedrooms as a medical office. His patients entered the rear office through a rear pocket window, which slid up into the frame and effectively functioned as a rear door. Bogue also converted what was originally the unfinished attic into additional living space and constructed an interior staircase.⁷

In 1901, the house was sold to the second physician, Dr. David Winslow Hunt. Hunt also resided at the house with his family. He moved his medical office out of the house and into a rear carriage house on the property (not extant). In 1902, Hunt expanded the attic, adding additional space on its west side to accommodate an additional bedroom and bathroom.⁸

In 1907, the house was purchased by the third physician, Dr. Allen Lincoln Bryant. Bryant resided at the house for only a brief period before selling it to Leonidas Hamlin Hurtt in 1908. Hurtt worked as a chemist in the medical field. He billed himself as a doctor, though he does not appear to have had formal training or licensure in medicine. Hurtt completed a series of alterations so that the house would be "a suitable residence for his fiancé [*sic*]."⁹ Most of the alterations completed by Hurtt were confined to interior spaces and consisted largely of overlaying new finishes over existing finishes and re-programming and remodeling several interior spaces. Hurtt also enclosed what was originally an open porch on the west façade to accommodate a new kitchen, laundry, and bathroom. Unlike alterations that were completed by previous occupants, which complemented the original architectural character of the house, those completed by Hurtt were largely incongruent with the Late Victorian styling of the house, and because of this were later reversed when the building was restored in the 1980s. One exception was the porch enclosure, which was retained and repurposed as the service kitchen. Hurtt moved out of the house circa 1912, stating that it was too big, though he owned it until 1914.¹⁰

⁴ "Doctors House Museum and Gazebo Conditions Assessment Report," prepared by Architectural Resources Group, Feb. 21, 2017, 2.

⁵ Theresa Walker, "Alive and Well: Loving Work Restores Doctors' House to Picture of Health," *Los Angeles Times*, Jun. 24, 1984.

⁶ "Gala Celebrates Doctors' House Opening," *The Glendale Historical Society Newsletter*, Vol. 5 No. 1, 1984.

⁷ "Doctors House Museum and Gazebo Conditions Assessment Report" (2017), 2.

⁸ *Ibid.*, 3.

⁹ "The Doctors' House: The Fourth 'Doctor,'" *The Glendale Historical Society Newsletter*, Vol. 5 No. 4, 1985.

¹⁰ *Ibid.*

Doctors House
Name of Property

Los Angeles, California
County and State

From 1917 to 1920 the house was rented by Nell Shipman.¹¹ Born in Canada as Helen Foster-Barham, she came to the United States in 1904 and pursued a career in acting, landing roles in silent films in the 1910s. After turning down a contract from film titan Samuel Goldwyn, Shipman started her own production company in 1918. Her most commercially successful film, *Back to God's Country*, was released the following year, in 1919.¹² In the 1920s, Shipman moved her company north, first to Washington and then to Idaho, where she shot films from 1922 to 1925 and honed what became her signature style. Her films were shot on-location in isolated settings and starred strong, resourceful women who performed bold stunts.¹³ Shipman “stopped making films after 1925 but continued to write novels and magazine articles for years.”¹⁴

In 1921, the house was sold to the Dzaich and Kordich families, related by marriage. They subdivided the single dwelling into two separate residential units, which required the partition of some interior spaces as well as the addition of an additional upper entrance to the rear (north) façade.¹⁵ These alterations were later reversed when the house was restored in the 1980s.

In 1979, the house and its land were purchased by a real estate developer, who announced plans to raze the building and construct a new apartment complex in its place.¹⁶ The pending demolition of the building sparked outcry among local historians and advocates. They organized as The Glendale Historical Society and lobbied local elected officials to purchase the house and move it to a new location for use as a museum. This effort was successful. In 1980, the house was acquired by the City of Glendale and relocated to Brand Park, a public park approximately five miles to the northwest of the original location. For the move, the building was cut into two pieces, loaded onto flatbed trucks and transported, and eventually lowered onto a concrete foundation. It took about 8.5 hours to complete the move.¹⁷

Once the move was complete, The Glendale Historical Society began the years-long process of restoring the house. The two halves of the building were stitched together, and volunteers conducted extensive research to ascertain original features and finishes and reverse inappropriate alterations, almost all of which were confined to the interior. The exterior remained remarkably intact. Non-original features like partitions, flooring, and wall treatments were removed, and based on meticulous research and limited exploratory demolition missing features and finishes were replicated and reinstalled. Restoration work was financed through a combination of Community Development Block Grants, municipal funds, local businesses, and private donations, and was completed by volunteers who donated a total of over 18,000 hours.¹⁸

¹¹ City of Glendale, “Nell Shipman/Doctor House,” online, accessed Jan. 2023.

¹² Steve Ryfle, “Tribute Planned for Silent Film Pioneer,” *Los Angeles Times*, Sept. 21, 1994.

¹³ Tom Trusky, Women Film Pioneers Project, “Nell Shipman,” online, accessed Jan. 2023.

¹⁴ Ryfle, “Tribute Planned for Silent Film Pioneer” (1994).

¹⁵ “Doctors House Museum and Gazebo Conditions Assessment Report” (2017), 6.

¹⁶ Paula Selleck, “Group Asks City Funds to Save Old House,” *Los Angeles Times*, Oct. 14, 1979.

¹⁷ “Doctors House Museum and Gazebo Conditions Assessment Report” (2017), 4.

¹⁸ Walker, “Alive and Well: Loving Work Restores Doctors’ House to Picture of Health” (1984).

Doctors House
Name of Property

Los Angeles, California
County and State

The process by which the restoration work was completed is detailed in a 1984 newsletter published by The Glendale Historical Society:

Authenticity was the prime concern throughout the restoring and refurnishing of the house. Exterior and interior paint and varnish layers were analyzed so that wherever possible the early hues could be duplicated. The decorative elements of the exterior, including the three moon-gate-arch porches, were dismantled, individually repaired or re-milled, and placed in their original positions; lost items were duplicated with the aid of early photographs of the originals. Special interior features, such as the speaking tube, the doctor's office, and authentic plumbing and lighting fixtures, were faithfully recreated in all possible detail. The wallpaper patterns in the major rooms were custom replicated from pre-1900 fragments surviving in remote and protected areas.¹⁹

In addition to restoring the house, The Glendale Historical Society obtained a collection of period-appropriate interior furnishings to display throughout the building. Some furnishings were purchased, while others were given to the historical society by private benefactors. The restoration project was completed in 1984 and the museum opened to the public for tours starting in June of that year.²⁰ The building has continuously operated as a house museum since.

Criterion C: Architecture

The Doctors House is an excellent local example of the Queen Anne style, an idiom characterized by its exuberant exterior façades and prolific application of machine-made ornament. Typical of the Queen Anne style, the building also incorporates some elements of the Eastlake style. As such, its physical characteristics are also closely associated with the Late Victorian period, which is generally defined as the latter decades of the nineteenth century and is associated with the nascence of many communities in Southern California, including Glendale.

Queen Anne architecture originated in the mid-nineteenth century and was championed by a group of English architects led by Richard Norman Shaw. Queen Anne is a misnomer as the style was neither associated with the reign of Queen Anne—1712-1714—nor did it reference the architecture of that era. Instead, the style took cues from late Medieval British architecture and the American picturesque movement, which rejected the decorum of classical styles and favored a less formal aesthetic that reflected individual expression.²¹ The style was introduced at the 1876 Centennial Exposition in Philadelphia when British exhibitors constructed brick-and-half-timbered buildings that reflected the ideas of Shaw and others.²² The exhibit buildings were well-received, and this aesthetic was adopted by American architects.

By about 1880, the Queen Anne style had emerged as a dominant idiom of residential architecture in the United States. Its popularity was catalyzed by multiple factors. The advent of

¹⁹ "Gala Celebrates Doctors' House Opening," *The Glendale Historical Society Newsletter*, Vol. 5 No. 1, 1984.

²⁰ Ibid.

²¹ Virginia Savage McAlester, *A Field Guide to American Houses* (New York: Alfred A Knopf, 2013), 350.

²² Janet W. Foster, *The Queen Anne House: America's Victorian Vernacular* (New York: Abrams, 2006), 14-15.

Doctors House
Name of Property

Los Angeles, California
County and State

architectural pattern books and magazines like *The American Architect and Building News* disseminated the style and its attributes to a wide audience.²³ Advances in mass production associated with the Industrial Revolution made it tenable to produce the style's balloon framing elements and decorative features en masse, and an expansion of the nation's railroad network made it easy for people to order architectural elements from catalogs and have them shipped to destinations nationwide. Materials such as doors, windows, roofing, siding, and decorative trim elements could easily be produced in factories and then shipped to construction sites for installation. Skilled contractors and laypeople alike were able to replicate what they saw in print.

The Queen Anne style peaked in popularity in the 1880s and 1890s, though it continued to be used by architects and builders until the early twentieth century. Buildings, mostly houses, rendered in the style are distinguished by their exuberance, eclecticism, and willful irregularity and share a common cadre of characteristics.²⁴ Queen Anne style buildings have strong vertical proportions, giving the impression that they are perched on top of, rather than integrated into, the surrounding landscape. Roofs are complex, consisting of multiple steep hips and gables, and are often capped by towers, turrets, domes, or cupolas. Exterior walls contain a multitude of textures and materials—often applied in combination—including horizontal wood siding, patterned wood shingles, beadboard, and brick. Windows are typically double-hung or casement wood sash and are set in narrowly proportioned frames; higher-style examples often have stained glass inserts. Canted bays, or chamfered bay-like corners, are also a common feature, as are prominent corner porches. Exterior façades typically boasted bright color palettes to accentuate distinctive design features.²⁵

Some of the more ambitious examples of the Queen Anne style are replete with decorative wood and sometimes metal details. Decorative appurtenances including turned columns, balustrades, spindles, lattices, brackets, coffered panels, and applied ornament like rosettes, sunbursts, moon gates, swags, and finials were commonly used to adorn porches, balconies, eaves, and other trim elements. That these milled wood details were so widely available was a testament to the Industrial Revolution's production methods and new tools like the lathe, jigsaw, and band saw.²⁶ The most elaborate examples of Queen Anne architecture were chockablock with ornament, “no roof treatment could be complicated, and no surface was left unembellished.”²⁷ These examples epitomized what critics and later generations would condemn as Victorian excess.

It was common for Queen Anne style buildings to incorporate elements of a closely related derivative called the Eastlake style. Named for English writer and architect Charles Locke Eastlake, Eastlake architecture was distinguished by its delicate jig-sawn wood ornament and squared—instead of rounded or angled—window bays. Eastlake style buildings tended to be boxy and perpendicular; Queen Anne buildings were curvilinear and angular. As noted by

²³ McAlester, *A Field Guide to American Houses* (2013), 350.

²⁴ SurveyLA Los Angeles Citywide Historic Context Statement, “Context: Architecture and Engineering, 1850-1980; Theme: Late 19th and Early 20th Century Residential Architecture 1885-1910,” Jul. 2019, 17.

²⁵ Foster, *The Queen Anne House: America's Victorian Vernacular* (2006), 21.

²⁶ SurveyLA Los Angeles Citywide Historic Context Statement (2019), 17.

²⁷ SurveyLA Los Angeles Citywide Historic Context Statement (2019), 16.

Doctors House
Name of Property

Los Angeles, California
County and State

SurveyLA, “Eastlake and Queen Anne have so much in common that they are often mistaken for one another,” and features of both were often applied in combination.²⁸ This is true of the Doctors House. While the building’s primary architectural style is Queen Anne, its squared roof tower and some of its exterior wood details—including spindles, knobs, and newels—draw inspiration from Eastlake.

The ascension of the Queen Anne style coincided with a period of extraordinary growth in Southern California during the 1880s and 1890s, catalyzed by the arrival of transcontinental rail service to the region. The style became popular in Southern California at this time. Elements associated with the style were adapted to accommodate all types of housing in the region’s burgeoning communities, ranging from simple cottages and farmhouses to elaborate mansions, and incorporated varying degrees of detail. While the style was sometimes adapted to commercial and institutional buildings, it proved best suited to a residential context.²⁹

Queen Anne style architecture is visually synonymous with the origins of many Southern California communities, including Glendale, which was one of many new towns founded at the zenith of the 1880s railroad boom. Anchoring the town was a large tourist hotel called the Glendale Hotel, designed by San Francisco architects Samuel and Joseph Cather Newsom and completed in 1887.³⁰ At three stories tall, the hotel was an imposing edifice with steeply pitched roofs, towers and turrets, wraparound porches, and a bevy of milled wood ornament, and was a premier example of the Queen Anne style. The hotel was converted to a sanitarium and eventually demolished in 1924. The style was also expressed in the vernacular of Glendale’s early houses. Many were simple cottages that merely incorporated some loose references to the Queen Anne idiom; others embraced the tenets of the style more fully.

Built circa 1888, the Doctors House is an excellent example of the Queen Anne style in Glendale. The building exhibits nearly all of the definitive characteristics of the style: vertical massing, asymmetrical building façades, a complex roof with steeply pitched hips and gables and a hipped tower, horizontal wood lap siding, articulated corner porches, canted window bays, narrowly proportioned wood windows, and extensive application of milled wood decorative details including turned posts, moongate arches, indented coffered panels, sawn brackets, fretwork, spindles, finials, pendants, and flat casing trim. Interior spaces are also generally intact and reinforce the building’s association with the Queen Anne style and the Late Victorian period.

The Doctors House is also an exceptionally rare example of the Queen Anne style in Glendale. Most of Glendale’s early buildings were vernacular and designed in stylistically simpler derivatives of Late Victorian era architecture. They lacked the degree of articulation found on higher-style buildings like the Doctors House. Of the few early buildings that were designed to be more architecturally distinctive, nearly all have either been razed or altered, leaving few legible traces of the community’s early architectural heritage. The Doctors House is one of only

²⁸ SurveyLA Los Angeles Citywide Historic Context Statement (2019), 2.

²⁹ SurveyLA Los Angeles Citywide Historic Context Statement (2019), 17

³⁰ City of Glendale, “South Glendale Historic Context Statement,” prepared by Historic Resources Group, Sept. 30, 2014, 32.

Doctors House
Name of Property

Los Angeles, California
County and State

two intact examples of the Queen Anne style remaining in Glendale. The second example, Goode House, was constructed in 1891 and is located at 119 N. Cedar Street.³¹

In summary, the Doctors House embodies distinctive characteristics of the Queen Anne style and the Late Victorian period. Its features are illustrative of the aesthetic trends that defined the architectural character of Glendale in its nascence, and the building is an excellent local interpretation of its style and period. The Doctors House is eligible under Criterion C.

³¹ City of Glendale, "South Glendale Historic Context Statement" (2014), 49; Denise Hamilton, "Commission Agrees to Move, Renovation of E.D. Goode House," *Los Angeles Times*, Oct. 30, 1986; The Glendale Historical Society, "Still Standing After All These Years," written by Katherine Peters Yamada, online, accessed Jan. 2023.

Doctors House
Name of Property

Los Angeles, California
County and State

9. Major Bibliographical References

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Doctors House
Name of Property

Los Angeles, California
County and State

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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
- Federal agency
- Local government
- University
- Other

Name of repository: The Glendale Historical Society Archives

Historic Resources Survey Number (if assigned): _____

10. Geographical Data

Acree of Property less than one acre

Doctors House
Name of Property

Los Angeles, California
County and State

Latitude/Longitude Coordinates

Datum if other than WGS84: _____

(enter coordinates to 6 decimal places)

1. Latitude: 34.183690 Longitude: -118.277440

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

The boundary is limited to the physical footprint of the building, in the northwest section of Brand Park in the City of Glendale, Assessor Identification Number (AIN) 5630-002-904.

Boundary Justification (Explain why the boundaries were selected.)

The boundary encompasses all aspects of the building essential in conveying its significance. Since the building was moved and its setting was modified, no spaces outside the building envelope are included within the boundary.

11. Form Prepared By

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organization: Architectural Resources Group

street & number: 360 E. 2nd Street, Suite 225

city or town: Los Angeles state: CA zip code: 90012

e-mail: a.goodrich@argcreate.com

telephone: (626) 583-1401

date: March 2023; Revised April 2023, May 2023

Additional Documentation

Submit the following items with the completed form:

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

Photographs

Submit clear and descriptive photographs. The size of each image must be 1600x1200 pixels (minimum), 3000x2000 preferred, at 300 ppi (pixels per inch) or larger. Key all photographs to the sketch map. Each photograph must be numbered and that number must correspond to the photograph number on the photo log. For simplicity, the name of the photographer, photo date, etc. may be listed once on the photograph log and doesn't need to be labeled on every photograph.

Doctors House
Name of Property

Los Angeles, California
County and State

Photo Log

Name of Property: Doctors House
City or Vicinity: Glendale
County: Los Angeles
State: California
Photographer: Andrew Goodrich, Architectural Resources Group
Date Photographed: August 2022

Description of Photograph(s) and number, include description of view indicating direction of camera:

- 1 of 12 Primary/south façade, view north
- 2 of 12 Primary/south façade and southeast porch, view northwest
- 3 of 12 Stoop and primary entrance door on primary/south façade, view north
- 4 of 12 Southwest porch on primary/south façade, view north
- 5 of 12 East façade and northeast porch, view southwest
- 6 of 12 West façade, view northeast
- 7 of 12 North façade, view southeast
- 8 of 12 Interior, parlor, view northeast
- 9 of 12 Interior, dining room, view east
- 10 of 12 Interior, detail of dining room fireplace, view north
- 11 of 12 Interior, upstairs bedroom, view southeast
- 12 of 12 Interior, upstairs master bedroom, view southwest

Doctors House
Name of Property

Los Angeles, California
County and State

Location Map

Property location is marked with a red arrow (ESRI; annotations by ARG)

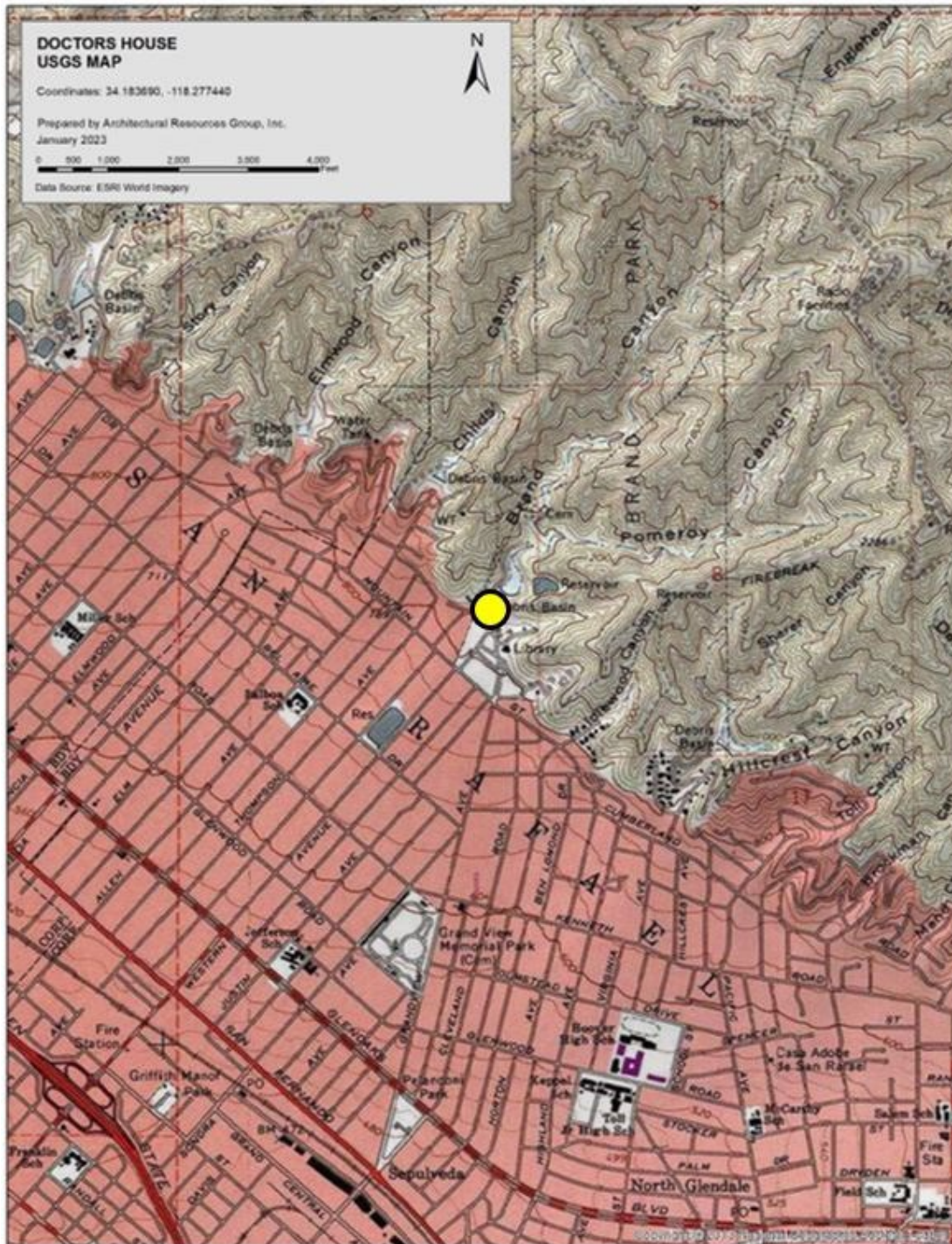


Doctors House
Name of Property

Los Angeles, California
County and State

USGS Map

Property location is marked with a yellow dot (ESRI; annotations by ARG)



Doctors House
Name of Property

Los Angeles, California
County and State

Site Map

Property boundary (building footprint) is shaded red (LA County Office of the Assessor; annotations by ARG)



Paperwork Reduction Act Statement: This information is being collected for nominations 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.). We may not conduct or sponsor and you are not required to respond to a collection of information unless it displays a currently valid OMB control number.

Estimated Burden Statement: Public reporting burden for each response using this form is estimated to be between the Tier 1 and Tier 4 levels with the estimate of the time for each tier as follows:

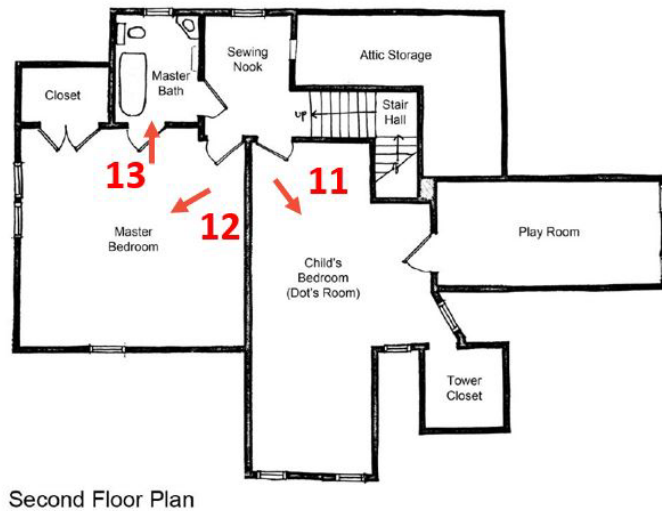
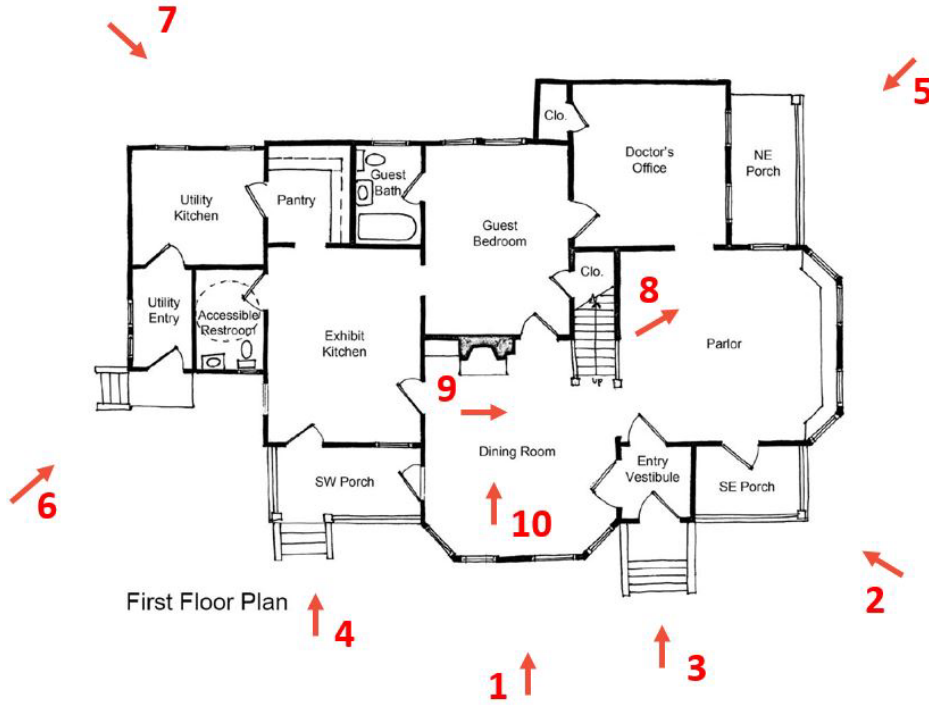
- Tier 1 – 60-100 hours
- Tier 2 – 120 hours
- Tier 3 – 230 hours
- Tier 4 – 280 hours

The above estimates include time for reviewing instructions, gathering and maintaining data, and preparing and transmitting nominations. Send comments regarding these estimates or any other aspect of the requirement(s) to the Service Information Collection Clearance Officer, National Park Service, 1201 Oakridge Drive Fort Collins, CO 80525.

Doctors House
Name of Property

Los Angeles, California
County and State

Sketch Map/Photo Keys (not to scale)



Doctors House
Name of Property

Los Angeles, California
County and State

Figure 1 Original location at 921 East Wilson Avenue, 1977; courtesy City of Glendale, Historic Preservation Element of the General Plan



Figure 2 Original location at 921 East Wilson Avenue, 1970s; courtesy The Glendale Historical Society



Doctors House
Name of Property

Los Angeles, California
County and State

Figure 3 Prepared for relocation, 1980; note incision in center of building; courtesy The Glendale Historical Society



Figure 4 Prepared for relocation, 1980; angled view of incision in center of building; courtesy The Glendale Historical Society



Doctors House
Name of Property

Los Angeles, California
County and State

Figure 5 South façade, following relocation to Brand Park, during 1980-1984 restoration; courtesy The Glendale Historical Society

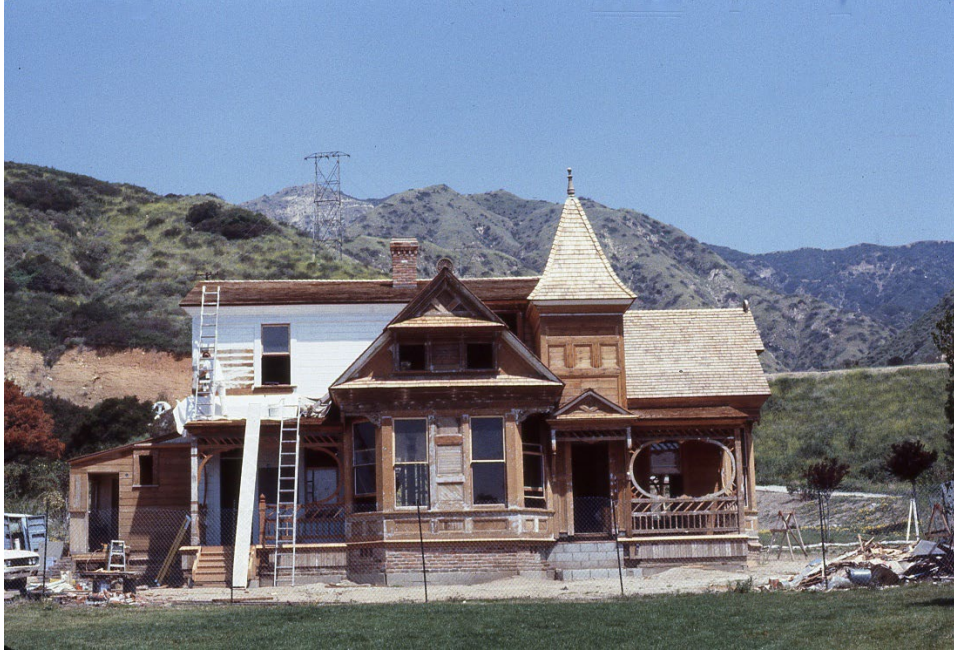


Figure 6 Volunteers involved with 1980-1984 restoration; courtesy The Glendale Historical Society



Doctors House
Name of Property

Los Angeles, California
County and State

Figure 7 Volunteers working during 1980-1984 restoration; courtesy The Glendale Historical Society



Figure 8 At completion of restoration, circa 1984; courtesy The Glendale Historical Society



Doctors House
Name of Property

Los Angeles, California
County and State

Photo 1 Primary/south façade, view north



Photo 2 Primary/south façade and southeast porch, view northwest



Doctors House
Name of Property

Los Angeles, California
County and State

Photo 3 Stoop and primary entrance door on primary/south façade, view north



Photo 4 Southwest porch on primary/south façade, view north



Doctors House
Name of Property

Los Angeles, California
County and State

Photo 5 East façade and northeast porch, view southwest



Photo 6 West façade, view northeast



Doctors House
Name of Property

Los Angeles, California
County and State

Photo 7 North façade, view southeast



Photo 8 Interior, parlor, view northeast



Doctors House
Name of Property

Los Angeles, California
County and State

Photo 9 Interior, dining room, view east



Photo 10 Interior, detail of dining room fireplace, view north



Doctors House
Name of Property

Los Angeles, California
County and State

Photo 11 Interior, upstairs bedroom, view southeast



Photo 12 Interior, upstairs master bedroom, view southwest

