

# Appendix B

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Historic and Architectural Assessment

August 27, 2018

**Superintendent's Residence/Whitecotton Cottage  
Fairmont Hospital, Alameda County  
Historic Resource Summary**

**Introduction**

As requested by the County of Alameda's General Services Administration, this report addresses historic resource issues related to the former Superintendent's Residence (aka Whitecotton Cottage) located on the campus of Alameda County's Fairmont Hospital. This evaluation has specifically been requested by the County to address the subject building's historic resource status and is based on several site visits and research, including historical research inquiries at:

- The Northwest Information Center (NWIC) of the California Historical Resources Information System (CHRIS), where there are no available records for the subject property;
- The Oakland Public Library's History Room, which had a newspaper clipping folder for Fairmont Hospital with general historical information;
- The Hayward Area Historical Society (HAHS), which has a small collection of previous research records for Fairmont Hospital, including a research file folder specific to the "Fairmont Hospital – Superintendent's Residence," and which is discussed below.

**Resource Summary**

The former Superintendent's Residence was previously evaluated for the County and resulted, in August of 2001, in the publication of an *Historical and Architectural Assessment of the Superintendent's Residence at Fairmont Hospital* for the County of Alameda and prepared by the architectural historian Woodruff Minor (attached).

While there was evidently minimal available historical information about the building, that report pinpointed the 1903 origins of the Superintendent's Residence and indicated that it remained in use as the residence of the hospital superintendent (aka resident physician) until c1970, when it was adapted for other hospital program uses, until c2000, when it was vacated. That report also parenthetically identified the building by its common name, White Cotton Cottage.

Regarding that common name, a c1980 map of the campus was included in the 2001 report and is also presently displayed on the wall in the ground floor of the existing cafeteria building. Alongside the latter, there is a building index and which labeled the subject building the "Whitecotton Cottage." That label is evidently the accurate one, as Whitecotton is the surname of a family whose head, Dr. G. Otis Whitecotton, was medical director of the Alameda County hospitals from c1947 to c1960. While there is no specific evidence for this assertion, nor evidence that Whitecotton may have resided in this house, it may be presumed that the Whitecotton name was given to this building during or after his leadership of the County hospitals.

In summary, based on the 2001 evaluation, the subject building has been identified as an historic resource per a finding of eligibility to the California Register of Historical Resources (CR), the bases for which are twofold:

- Under CR criterion 1, the subject building is identifiably associated with historic events, specifically the original Alameda County Infirmary and its successor, Fairmont Hospital;
- Under CR criterion 3, the subject building is identified as embodying design and construction distinction as it is “an excellent and illustrative local example of the Shingle Style.”  
(from *Assessment*, p7)

Consequently, the former Superintendent's Residence/Whitecotton Cottage is presently listed on the Alameda County Register of Historic Resources (see attached).

In addition to identifying applicable areas of significance, the previous evaluation requisitely addressed the building's historic “integrity.” For historic resource evaluation purposes, “integrity” is a secondary measure of a given resource's identified significance – in addition to fulfilling a given criteria of significance, the resource must also retain sufficient integrity with which to convey its importance in the present. To reiterate, in this case, the identified importance of the former Superintendent's Residence/Whitecotton Cottage is its association to the original Alameda County Infirmary and early Fairmont Hospital, plus its architectural distinction as an excellent example of the Shingle Style. Relative to which, the previous evaluation generally concluded that the “house and setting retain a relatively high degree of integrity” (*Assessment*, p6).

Evidently, since 2001, further and relatively substantive changes have occurred to the site, the setting and the building itself, including:

- Additional building removals and additions on the directly adjacent campus;
- Overall exterior building deterioration due to its vacancy;
- Deterioration of the surrounding landscape;
- Extensive interior dilapidation.

Such changes have resulted in the existing poor condition (i.e., overall design and material degradation and loss) of the subject building exterior and site, and of the very poor condition (i.e., extensive degradation) of its interior.

Thus, at this juncture, a re-evaluation of the integrity of the subject resource is warranted in order to confirm its current historic resource eligibility status and based on the seven “aspects of integrity” defined under the National and California registers, as follows:

- *Location* – the former Superintendent's Residence/Whitecotton Cottage remains in its historic location, so this integrity aspect is fully intact;
- *Setting* – the former residence has an immediate and associated setting amidst its early landscape. While deteriorated and beyond its immediate setting substantially changed, the integrity of its setting is largely intact;
- *Feeling and Association* – the former residence remains associated with yet semi-isolated from the hospital, which was also an original characteristic. Though use changes and subsequent vacancy have diminished the historic feeling of this former residence as well as its residential association, both integrity aspects are partially intact.

Consequently, under these four related aspects of integrity, the former Superintendent's Residence/Whitecotton Cottage continues to convey the significance of the identified historic events,

specifically the original Alameda County Infirmary and the early Fairmont Hospital, of which the subject building is the only (now partially) intact as well as oldest surviving building.

There are three additionally interrelated integrity aspects – *design, materials* and *workmanship* – that directly relate to the subject building's original and early design and construction. Per photos included in the 2001 evaluation (figs.2 & 4), the former residence was then in an intact state and in use. Since, the building has been vacant. Its current state is dilapidated, fenced and boarded-up. At present, it is in a diminished state with respect to the workmanship that is embodied in its original/early design and materials. As these three aspects of integrity have been substantially affected and are insufficiently intact, the extant building does not continue to convey design or construction excellence or importance. Therefore, the existing Superintendent's Residence/Whitecotton Cottage no longer appears to meet CR criterion 3.

In conclusion, a single basis for a finding of historical significance has sustained. Based on its association to historic events – both the original Alameda County Infirmary and the early Fairmont Hospital – the Superintendent's Residence/Whitecotton Cottage remains eligible for the CR, though no longer on the basis of its design and construction..

Signed:



Mark Hulbert  
Preservation Architect

attached: figs.1-4; 2001 historic resource evaluation; page from Alameda County Register



Fig.1 – Superintendent's Residence/Whitecotton Cottage, Front (south), 2018



Figure 3. South Elevation, Superintendent's Residence, Fairmont Hospital.

Fig.2 – Superintendent's Residence/Whitecotton Cottage, Front (south), 2001



Fig.3 – Superintendent's Residence/Whitecotton Cottage, West side, 2018

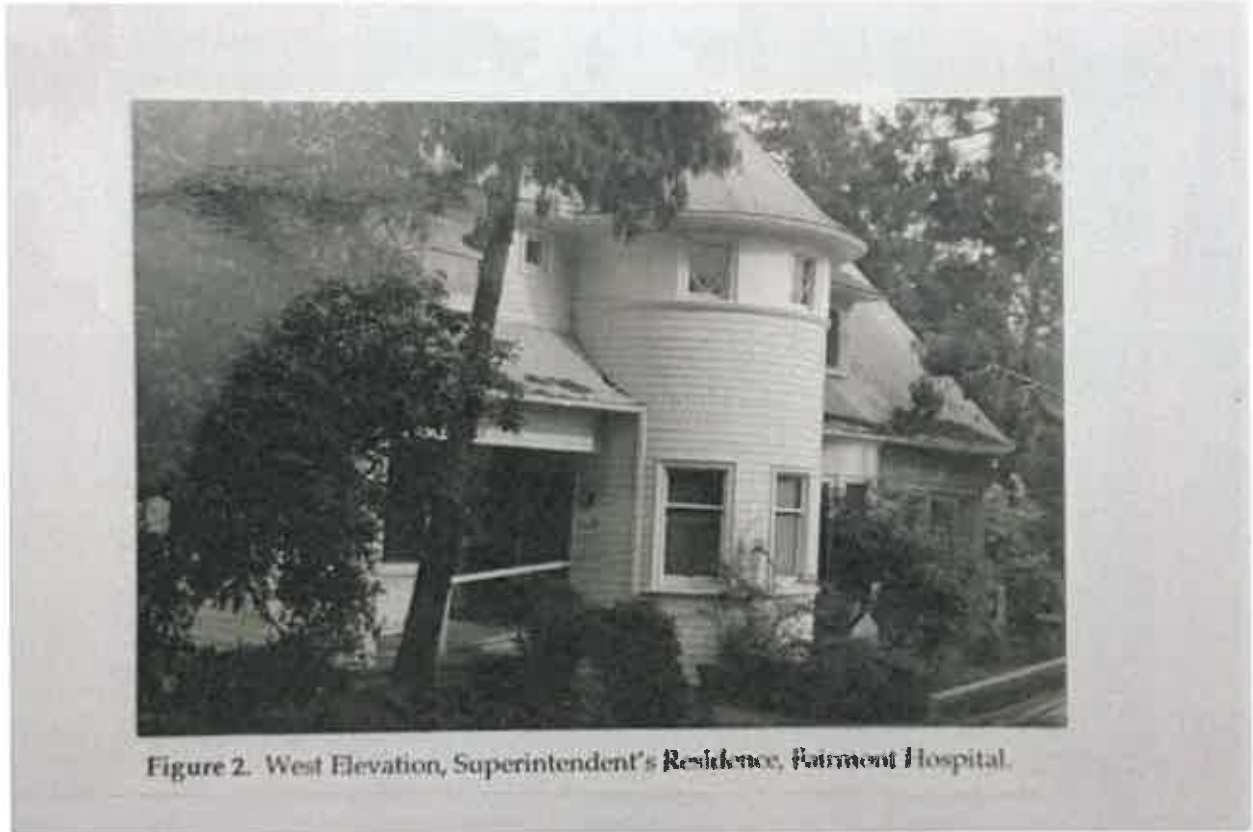


Fig.4 – Superintendent's Residence/Whitecotton Cottage, West side, 2001

***Historical and Architectural Assessment***

**Superintendent's Residence  
Fairmont Hospital  
San Leandro  
CA**

**Prepared for:**

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**August 31, 2001**

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## **Summary of Findings**

This report provides an historical and architectural assessment of the former Superintendent's Residence ("White Cotton Cottage") on the campus of Fairmont Hospital, San Leandro, California. Owned and operated by Alameda County since 1869, the hospital was originally known as the Alameda County Infirmary. The facility has undergone several major phases of redevelopment since the early 1900s. The Superintendent's Residence, erected in 1903, is the oldest surviving building on the campus. It is also an excellent local example of the Shingle Style, a popular eclectic style of the late 19<sup>th</sup> and early 20<sup>th</sup> centuries.

Potential significance has been assessed in relation to the criteria of the California Register of Historical Resources, the standard for evaluating cultural resources under the California Environmental Quality Act (CEQA). Based on an evaluation of its historical associations and architectural qualities, the Alameda County Infirmary Superintendent's Residence appears to be eligible for listing on the California Register of Historical Resources.

## **Background**

The report was prepared by Woodruff Minor, an architectural historian who meets the qualifications of the State Office of Historic Preservation. Michael R. Adamson served as research assistant. The property was inspected on July 16, 2001, when field notes were taken. Research was performed at the following repositories and archives: Earth Sciences and Map Library, University of California, Berkeley; Office of the Alameda County Board of Supervisors, Oakland; and the Oakland History Room and Newspaper Room, Oakland Public Library. Sources are listed at the end of the report.

## **Historical Overview of Fairmont Hospital**

Under early California law, county governments were mandated to provide medical care for the poor (the "indigent sick") within their jurisdiction. State laws enacted in 1855 and 1860 enabled county governments to levy taxes for the purpose of establishing county infirmaries. The tax revenues could be used to buy land, erect buildings, and hire administrative and medical staff.

Following its establishment in 1853, Alameda County initially provided medical care under contract to private practitioners. In 1864, the Alameda County Board of Supervisors rented a house in Oakland to serve as a hospital, staffed by one doctor and a steward. This facility was closed in 1869, when the County's new infirmary opened on a rural site south of Oakland.

### ***Early Development of the Alameda County Infirmiry: 1869–1912***

The Alameda County Infirmiry, now known as Fairmont Hospital, was the first medical facility in Alameda County to be owned and operated by the county government. Acquired in 1869, the site consisted of 123.92 acres of level and sloping land at the base of the hills near the town of San Leandro. Access was provided by a county road (today's Foothill Boulevard) bordering the west edge of the property.

The first hospital building at the new site opened in 1869. Several buildings were added during the 1870s, and other facilities were erected gradually over the following three decades. By 1910, the Alameda County Infirmiry consisted of a dozen or so larger buildings and many smaller structures clustered at the northwest corner of the hospital property. They included an administration building, various wards, a dining hall, laundry, shop buildings, a chapel, and staff residences, including the residence of the superintendent and resident physician. Buildings were wood-framed and many were of temporary construction. There was no coherent site plan, and the grounds were minimally landscaped.

Most of the hospital property functioned as a farm supplying milk, eggs, pork, and bacon to the infirmiry (and later to other county hospitals). Barns and sheds were grouped to the east of the infirmiry complex. Much of the rest of the property was given over to grazing. Because of this farming activity, the Alameda County Infirmiry was commonly known as "The Farm." The farm itself remained in operation on the hospital grounds until the 1950s.

### ***Expansion and Reconstruction: 1912–1945***

The Alameda County Infirmiry had long been considered inadequate due to substandard facilities and chronic overcrowding. In 1912, the Board of Supervisors agreed to hold an architectural competition for a new hospital complex to replace the existing infirmiry. The supervisors retained Henry H. Meyers as consulting architect to administer the competition. First prize was awarded in 1913 to San Francisco architect Charles Peter Weeks.

The winning design called for linked groups of buildings oriented around two axes, running east–west and north–south. All buildings were to be steel-framed, with hollow-tile walls, stucco veneer, and Renaissance styling. The principal (east–west) axis, facing west to Foothill Boulevard, contained an administration building and wards for short-term acute care. The north–south axis contained men's and women's dormitory wards for long-term convalescent care. The ten dormitories (and adjoining assembly and dining halls) were grouped around a rectangular courtyard incorporating a small artificial lake (already on the site). Estimated cost of construction for the entire complex was \$1 million. In 1916, work was completed on two ward buildings and an assembly hall at the north end of the dormitory group; the rest of the proposed complex was never built.

The complex was not completed due to budgetary constraints and a new county policy calling for separate medical facilities with specialized functions rather than

one general facility. Arroyo Sanatorium (1918), near Livermore, provided long-term care for curable tuberculosis patients. Delle Valle Farm (1924), adjoining Arroyo Sanatorium, served as a treatment center for tubercular children. Highland Hospital (1926), located in East Oakland near the county's population center, functioned as a major acute-care facility. Small outpatient clinics were also opened in several of the county's cities.

Under this new plan, the Alameda County Infirmary—renamed Fairmont Hospital when Highland Hospital opened—specialized in long-term care for convalescent patients, the aged and infirm, and persons with chronic and contagious diseases. Patients treated at Highland were transferred to Fairmont for recovery. Incurable tuberculosis patients were domiciled at Fairmont rather than at Arroyo or Del Valle.

Fairmont Hospital was largely rebuilt between 1917 and 1922 to accommodate its new mission. A number of older buildings were rehabilitated and remodeled, and some were moved to new sites. More than a dozen new buildings were erected. The hospital campus was extended south. New structures included ward buildings, dormitories for nurses and employees, a cafeteria, laundry, powerhouse, corporation yard, greenhouse, and entrance gates. The last major project prior to World War II was a ward building for incurable tuberculosis patients, opened in 1931 at the south end of the campus. The grounds were extensively landscaped with trees, shrubs, lawns, and trellis-covered walkways. The architect responsible for these site improvements was Henry H. Meyers, who served as the county's consulting architect until his retirement in 1935.

#### *Developments since World War II: 1945–present*

The next major phase of development at Fairmont occurred in the decade following World War II. The hospital ceased caring for the aged and infirm during these years, concentrating instead on convalescent care and chronic rehabilitation. Based on a 1935 master plan by architect Will G. Corlett, the hospital was substantially rebuilt between 1946 and 1955. New construction during this period included three large ward buildings, an interns' building, an administration building, a cafeteria, a powerhouse and shop building, and a firehouse. Most of these structures were designed by Corlett, and most are located in the south section of the hospital campus in a landscaped setting with covered walkways. Reinforced-concrete construction and Spanish Colonial Revival styling followed the model of the 1931 tuberculosis ward.

The postwar reconstruction of Fairmont Hospital was brought to completion in the early 1960s by the addition of a rehabilitation ward and a laundry at the south end of the campus. Facilities added since the 1960s have focused on long-term mental-health care. They include the Villa Fairmont (1981), Eden Outpatient Facility (1991), and John George Psychiatric Pavilion (1992).

## Historical Overview of the Superintendent's Residence

Prior to the construction of the existing building in 1903, the Superintendent of the Alameda County Infirmity (who also bore the title of Resident Physician) presumably lived elsewhere on the grounds, though no reference to an earlier residence has been found. In any case, the new residence met a long-felt need at the hospital for a permanent, detached dwelling for the superintendent. The site at the north edge of the campus, apart from the other buildings, provided a modicum of privacy that was progressively enhanced as the landscaping took hold. By the 1930s, the residence sat in a thick grove of trees, screened from the hospital proper. The elegant little house in its secluded setting would have given the superintendent a sense of retreat from the stress of a demanding job. In addition, the superintendent's family required separation from the hospital grounds, where patients with contagious diseases were housed.

The first mention of the residence in the *Minutes* of the Alameda County Board of Supervisors, who oversaw the hospital, appeared in the entry for May 4, 1903. At that meeting, "The county surveyor presented, and the Board approved and adopted, the plans and specifications for the residence of the Superintendent and Resident Physician. A contract bid notice is to be published in the Oakland Tribune, fixing the final day for acceptance of bids at May 25, 1903." Five bids were submitted, ranging from \$5,400 (E. Andersen) to \$6,100 (George C. Noll). The *Minutes* for the May 25<sup>th</sup> meeting noted: "Finding the lowest bid to be satisfactory, the Board accepted the bid of, and awarded the building contract to, E. Andersen, stipulating that all work had to be completed within ninety days from the Board's acceptance of a bond from Andersen." This occurred at the June 8<sup>th</sup> meeting, as recorded in the *Minutes*: "E. Andersen presented a contract and bond for the construction of the Superintendents' cottage. The Board approved the bond." Presumably the building was completed in September, though no further reference to the project has been found in the 1903 *Minutes*.

Little is known about the contractor, E. Andersen. There is a listing for an "Edward Andersen, carp (carpenter)" in the 1910 city directory for San Francisco. The name does not appear in city directories for Oakland, Alameda, and Berkeley. The architect of the building has not been documented. It is possible that the county surveyor (who presented the plans to the supervisors) may have been the designer, but it is not likely given the sophistication of the building. At any rate, the index to the *Minutes* of the Board of Supervisors makes no mention of a contract being awarded to an architect, nor do the contractor's magazines of the period. Oakland newspapers from June–September 1903 were scanned for some mention of the building, but no articles on the project were located.

The later history of the structure has not been fully documented. On the 1928 Sanborn map of the hospital campus, the building is identified as "Sup't's D" ("Superintendent's Dwelling"). This designation also appears on the revised 1950 Sanborn map of the campus. Site plans of Fairmont Hospital, dated 1948 and 1949, identify the building simply as "Cottage No. 1." In a 1973 site plan, it is identified as "Public Works Office." To summarize, it appears that the Superintendent's Residence served its original purpose until the 1950s, and that

had been adapted to new uses by the 1970s. The most recent tenant was a community-based organization called Humanistic Alternatives to Addiction Research and Treatment (HAART). Since 2000, the building has been vacant.

## **Description of the Superintendent's Residence**

The building occupies a somewhat isolated site near the northwest corner of the Fairmont Hospital Campus. It is encompassed by a small grove of mature trees, both conifer and deciduous, with a variety of shrubs planted around the base of the building. Remnants of a more extensive landscaping scheme survive, such as an abandoned terrace with deteriorated brick stairs on the south side of the house. An unpaved parking area, served by a short access road, adjoins the terrace. The house is on axis with the hospital's central quad, which is situated several hundred yards to the south.

The building is a one-and-one-half story, wood-frame structure with a brick foundation and partial basement. Walls are sheathed in wood shingles. The house has a generally rectangular plan elaborated by a staggered section on the east and a prominent semi-circular bay on the west. The roof system consists of a main gable facing south and north, an east-facing subsidiary gable on the house's staggered east section, and a rounded hip on the west-facing semi-circular bay. Shed-roofed dormers extend across the east and west slopes of the main gable. The wood-sash windows (double-hung and casement) have thin surrounds and simply detailed sills. The soffited eaves are delicately trimmed with narrow wood molding and understated dentil courses.

The symmetrical south façade, facing toward the hospital complex, has a full recessed porch with shingled piers. The glass-panel double doors of the entry are flanked by tall casement windows wrapping around the porch. Trimmed with mullion borders, they were added when the porch was enclosed. Two sets of casement windows (three per set) form a balanced pair in the gable, with an attic vent above. The focus of the west façade is the centrally placed semi-circular bay. A decorative course of sawtooth and gap-tooth shingles demarcates the two levels of the bay. Three double-hung windows wrap around the lower level, and three small casement windows with diamond-pattern sash are set into a stucco band tucked under the eave. The adjoining dormers have double-hung windows, with tiny casement windows flanking the bay. A porch supported by one shingled post is recessed into the northwest corner of the house, sheltering an entry with a massive wood door. The north façade is similar to the south façade, though lacking a full porch. The east side of the house is less formally composed, with windows at both levels and a tall brick chimney.

The interior is currently accessible through the door on the northwest porch. One enters a medium-sized entry hall. A curving seat is set into the rounded bay alcove on the right. To the left is a partially enclosed opening framing the staircase. Straight ahead, through a wide opening with pocket doors, is a large living room that once extended the full width of the house. A partition to the left cuts off a fireplace with an elaborate over-scaled mantle from the rest of the

room. Offices have been partitioned off in the former porch area. A single pocket door in the entry hall, to the left of the staircase, opens into a narrow hallway adjoined by three small rooms that may have originally functioned as servants' quarters. The hallway connects with a kitchen and two bathrooms at the rear. The elaborate staircase, with two landings, winds up to a gallery-like hall that wraps around the stairwell on all four sides. The staircase has multiple newel posts and a banister with curved elements; the newel posts and railing of the hall match the staircase. The semi-circular bay alcove opens onto the hall. Two bedrooms run across the north end of the house, two bedrooms are at the south end, and two bathrooms adjoined by closets are on the east side. The interior has plaster walls, plaster cove ceilings, and extensive wood trim.

The residence combines elements of the Queen Anne and Colonial Revival styles. The semi-circular bay window with its band of decorative shingles recalls the Queen Anne predilection for applied ornament and rounded forms. The shingle skin and gables belong to that phase of the Colonial Revival sometimes called "Old Colonial," which looked back to the vernacular, late-medieval architecture of 17<sup>th</sup> century New England. (The symmetry of the front façade and the eave denticulation make muted reference to 18<sup>th</sup> century colonial architecture, which tended to be Georgian, i.e., classically derived.) Eclectic combinations of Queen Anne and "Old Colonial" elements produced the residential Shingle Style, invented in the 1880s by several leading East Coast firms. Introduced in the Bay Area around 1890, the style achieving widespread popularity by 1900, when it began to be superseded by the more rustic shingled style known as Craftsman. The Superintendent's Residence is an excellent local example of the Shingle Style.

The house and setting retain a relatively high degree of integrity. Although the landscape plan of the garden is no longer intact and the grounds are unkempt, many of the trees survive. Remarkably, the site still retains a feeling of seclusion on Fairmont's crowded campus. The only significant change to the exterior of the house is the front porch, which appears to have been enclosed at an early date (ca. 1915-25). The alteration is compatible with the original design. The interior has been altered by the application of paint to the woodwork; by the addition of partitions to the entry hall, living room, former front porch, and south bedrooms; and by the remodeling of the bathrooms and kitchen.

## **Findings**

The Superintendent's Residence at Fairmont Hospital appears to be eligible for the California Register of Historical Resources under Criterion 1 (historical associations) and Criterion 3 (architectural quality). To be eligible for the California Register, an historical resource must be significant at the local, state, or national level, under one or more of the following four criteria:

- (1) It is associated with events that have made a significant contribution to the broad patterns of local or regional history, or the cultural heritage of California or the United States;

- (2) It is associated with lives of persons important to local, California, or national history;
- (3) It embodies the distinctive characteristics of a type, period, region, or method of construction, or represents the work of a master, or possesses high artistic values; or
- (4) It has yielded, or has the potential to yield, information important to the prehistory or history of the local area, California, or the nation.

The Superintendent's Residence appears to be eligible for the California Register under Criterion 1 because of its association with the Alameda County Infirmery and Fairmont Hospital. As the residence of the superintendent of the first county-run hospital in Alameda County, operating under a statewide mandate to provide medical care for the poor, the building "is associated with events that have made a significant contribution to the broad patterns of local or regional history, or the cultural heritage of California. . . ." It is the only intact building on the campus associated with the Infirmery's first phase of construction. It is also the oldest surviving building on the Fairmont Hospital campus—and probably the oldest building in Alameda County associated with a county-run hospital. As such, it appears to possess historical significance on the local level.

The Superintendent's Residence appears to be eligible for the California Register under Criterion 3 because it "embodies the distinctive characteristics of a type, period, region, or method of construction. . . [and] possesses high artistic values." The residence is an excellent and illustrative local example of the Shingle Style, embodying national design trend of the period. The house also displays a high level of workmanship as well as a high degree of integrity. As a presumably rare building type—an early 20<sup>th</sup>-century superintendent's residence on a hospital campus—the structure has further importance. As such, it appears to possess architectural significance on the local level.

Over the past two decades, most of the older buildings at Fairmont Hospital have been demolished or abandoned. The reasons for this include abatement for seismic safety, structural damage from the 1989 Loma Prieta earthquake, and site clearance for new projects. Today, extant historical resources are limited to the former Superintendent's Residence (1903), the Chapel (ca. 1910), the former Nurses' Dormitory (1918), Ward Building D (1931), and a half-dozen structures (and landscape features) dating from 1949–1955. With the exception of the Superintendent's Residence and Nurses' Dormitory, these older buildings and landscape features form the central quad of the campus. The Superintendent's Residence, though located to the north of the quad, is on axis with it. Together, these ten structures—the nine buildings of the quad and the residence—may be eligible for listing on the California Register of Historical Resources as an historic district. However, to make such an assessment would require further analysis beyond the scope of this report.

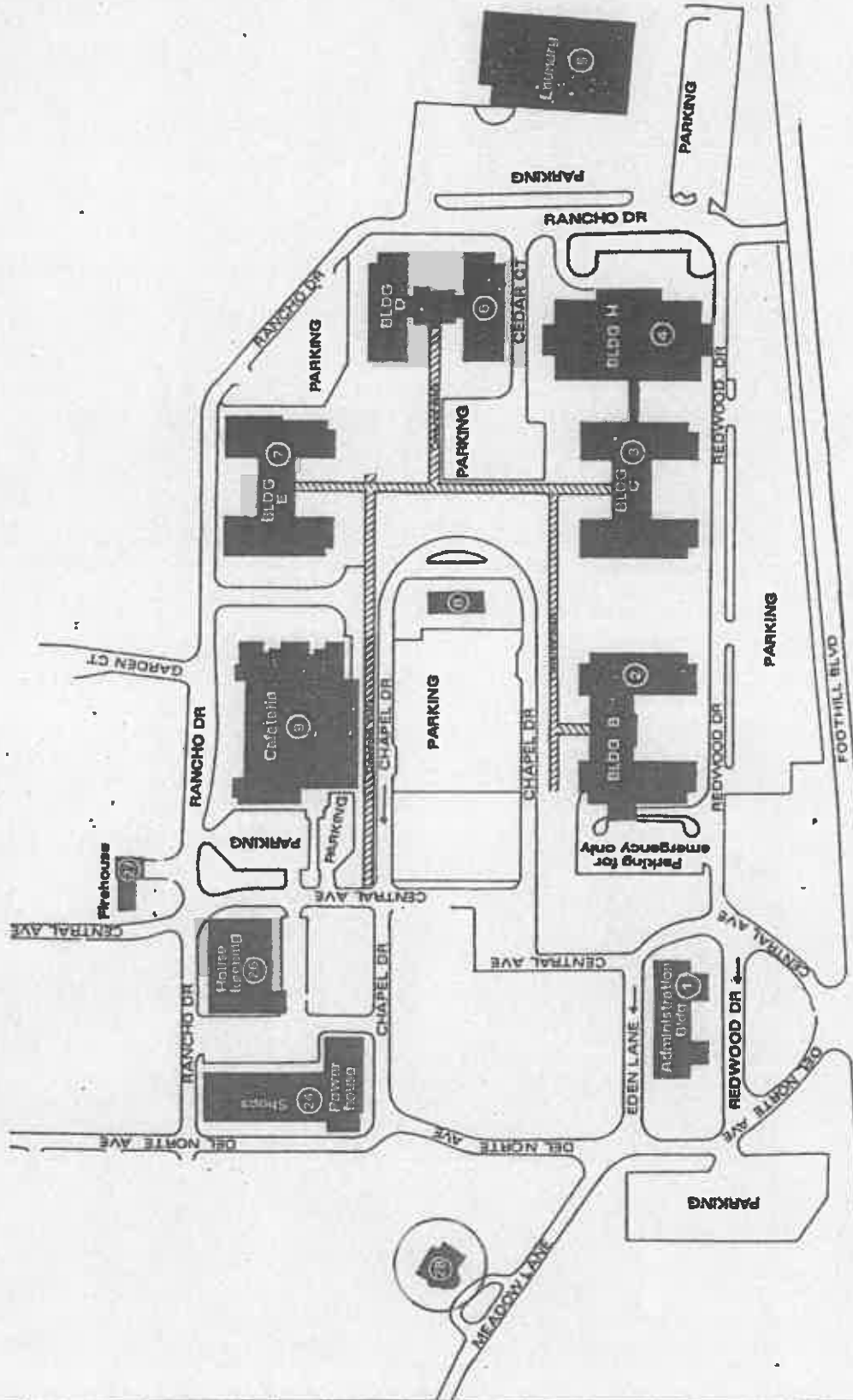
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**Figure 1. Map of a Portion of Fairmont Hospital, ca. 1985.**  
(Superintendent's Residence circled.)



Fairmont Hospital





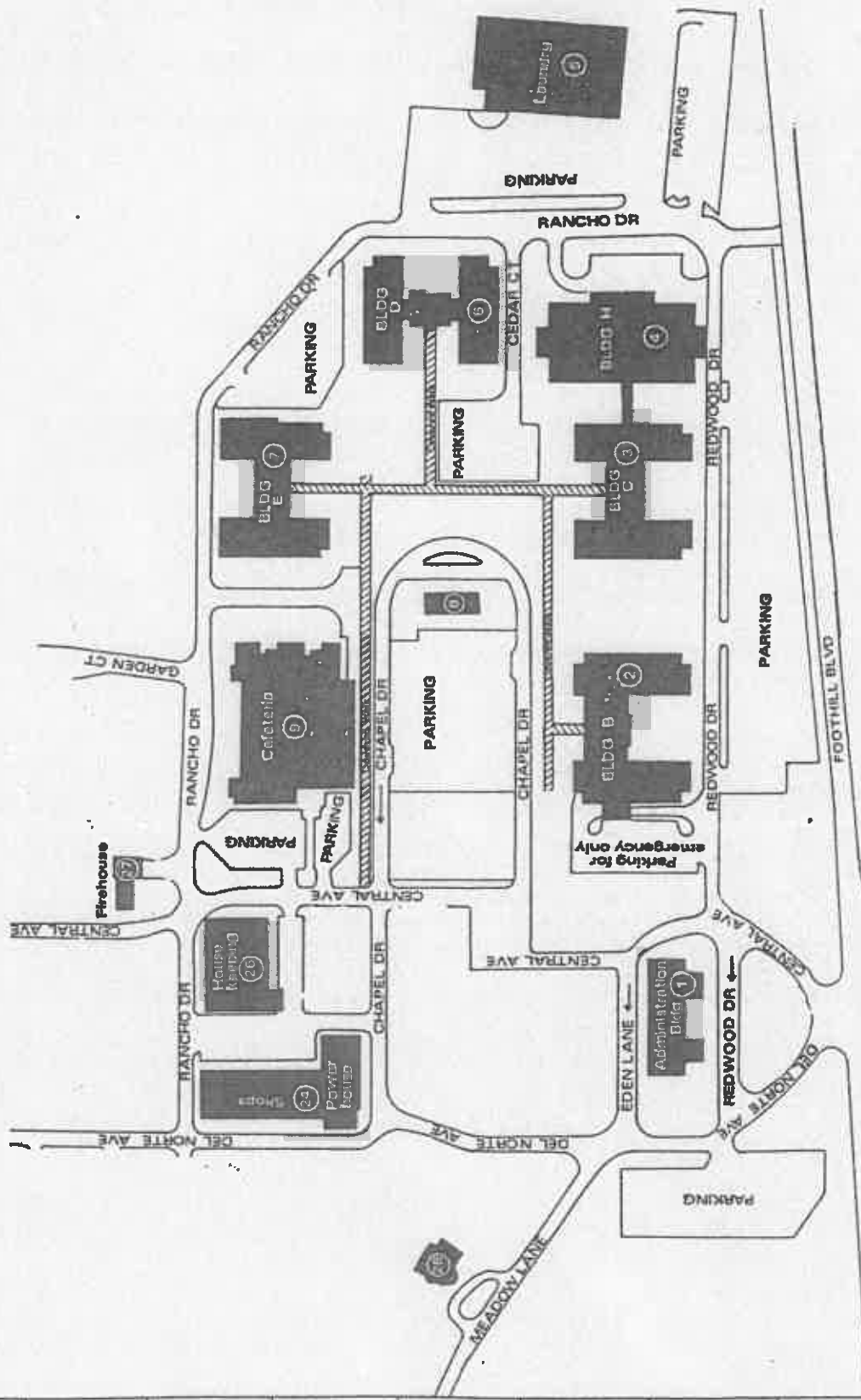
**Figure 2. West Elevation, Superintendent's Residence, Fairmont Hospital.**



**Figure 3. South Elevation, Superintendent's Residence, Fairmont Hospital.**



# Fairmont Hospital



**Figure 1. Map of a Portion of Fairmont Hospital, ca. 1985.  
(Superintendent's Residence circled.)**

**Figure 2. West Elevation, Superintendent's Residence, Fairmont Hospital.**

**Figure 3. South Elevation, Superintendent's Residence, Fairmont Hospital.**

## Alameda County Landmarks & Contributing Buildings Identified in 2005-2008 Comprehensive Survey

Address	Area	Property Type	Age	Previous Survey
4951 Arroyo Road	East County	Spanish Colonial VA Hospital	1925	East Alameda Survey - likely eligible
728 Bockman Road	San Lorenzo	Queen Anne Cottage	1895	San Lorenzo Survey - likely eligible under Criterion A
782 Bockman Road	San Lorenzo	Henry Bockman House		
2495 Castro Valley Blvd	Castro Valley	Castro Valley Lumber		
2520 Castro Valley Blvd	Castro Valley	Connie's Tropical Fish	1934	
2544 Castro Valley Blvd	Castro Valley	Formerly Crowe's Feed Shop		
2845-61 Castro Valley Blvd	Castro Valley	Chabot Theater		
22047-55 Center Street	Castro Valley	Four Square House		
14563 Cull Canyon Road	Castro Valley	Red barn, Cull's ranch	1855	
16874 Cull Canyon Road	Castro Valley	Farmhouse and barn		
2440 Depot Road	Hayward	Mt. Eden Cemetery	1860	
2595 Depot Road	Hayward/ Eden Area	Queen Anne - Herman Mohr House "Sea Breeze"		
22380 Eden Canyon Road	Castro Valley	Bank barn and associated barns		
10366 S. Flynn Road	East County	Period Revival farmstead		
15400 Foothill Boulevard	Fairmont	Fairmont Hospital	1920s	
15400 Foothill Boulevard	Fairmont	Queen Anne Victorian, White Cotton Cottage		
1048 Grant Avenue	San Lorenzo	Queen Anne - Heidi House	1890	San Lorenzo Survey - likely eligible under criteria A, B and C
Grove Way at Mission	Cherryland	Grove Way Bridge	c.1925	
24985 Hesperian Boulevard	Hayward	Cornelius Mohr house and farm, Classical Revival, Victorian with mansard roof, barn		San Lorenzo Survey - likely eligible under criteria A, B and C
End of Hollis Canyon off Eden Canyon	Castro Valley	Eastwood House		
5922 Jensen Road	Castro Valley	Jensen farmhouse; Salt box	1872	
16331 Kent Avenue	Ashland	Barn	1890	Ashland/Cherryland - possibly eligible

