This form constitutes a public request for the Texas Historical Commission (THC) to consider approval of an Official Texas Historical Marker for the topic noted in this application. The THC will review the request and make its determination based on rules and procedures of the program. Filing of the application for sponsorship is for the purpose of providing basic information to be used in the evaluation process. The final determination of eligibility and therefore approval for a state marker will be made by the THC. This form is to be used for subject marker requests only. Please see separate forms for either Historic Texas Cemeteries or Recorded Texas Historic Landmarks.

Proposed marker topic (Official title will be determined by the THC): Parkland Hospital

County: Dallas

Town (nearest county town on current state highway map): Dallas

Street address of marker site or directions from town noted above: 3819 Maple Street

Marker Coordinates:
If you know the location coordinates of the proposed marker site, enter them in one of the formats below:
UTM Zone 14 Easting 0704525 Northing 3631745
Lat: Long: (deg, min, sec or decimal degrees)

Otherwise, give a precise verbal description here (e.g. northwest corner of 3rd and Elm, or FM 1411, 2.6 miles east of McWhorter Creek):

Will the marker be placed at the actual site of the topic being marked? ☑ Yes ☐ No
If the answer is no, provide the distance and directions to the actual location from the marker (i.e. 100 yards east).

Subject marker definition
Subject markers are educational in nature and reveal aspects of local history important to a community or region. These markers honor topics such as church congregations, schools, communities, businesses, events and individuals. Subject markers are placed at sites that have historical associations with the topics, but no legal restriction is placed on the use of the property or site, although the THC must be notified if the marker is ever to be relocated.

Criteria
1. Age: Most topics marked with subject markers must date back at least 50 years, although historic events may be marked after 30 years, and historic individuals may be marked, or may be mentioned in a historical marker text, after they have been deceased 10 years. The THC may waive age requirements for topics of overwhelming state or national importance, although exceptions are rarely granted and the burden of proof for all claims and documentation is the responsibility of the narrative author.
2. **Historical significance:** A topic is considered to have historical significance if it had influence, effect or impact on the course of history or cultural development; age alone does not determine significance. Topics do not necessarily have to be of statewide or national significance; many historical markers deal with local history and a local level of significance.

**APPLICATION REQUIREMENTS**

Any individual, group or county historical commission (CHC) may apply to the THC to request an Official Texas Historical Marker for what it deems a worthy topic. Only complete marker applications that contain all the required elements and are received via email, as required, can be accepted or processed by the THC. For subject markers, the required elements are: sponsorship application form, narrative history and documentation. No photograph is required.

- Completed applications must be duly reviewed, verified and approved by the CHC in the county in which the marker will be placed. Paper copies of applications, whether mailed, emailed or delivered in person, cannot be accepted in lieu of the electronic version.
- The sponsorship application form, narrative history and documentation must be in the form of Microsoft Word or Word-compatible documents and submitted via email attachments to the THC no later than November 30, 2009.
- Required font style and type size are a Times variant and 12-point.
- Narrative histories must be typed in a double-spaced (or 1.5-spaced) format and include separate sections on context, overview, significance and documentation.
- The narrative history must include documentation in the form of reference notes, which can be either footnotes or endnotes. Documentation associated with applications should be broad-based and demonstrate a survey of available resources, both primary and secondary.
- Upon notification of the successful preliminary review of required elements by the THC, a non-refundable application fee of $100 is required. The fee shall be submitted to the THC within 10 working days of application receipt notification.

**APPROVAL BY COUNTY HISTORICAL COMMISSION**

The duly appointed marker representative (chair or marker chair) noted below for the county historical commission will be the sole contact with the THC for this marker application. To ensure accuracy, consistency and efficiency, all information from and to the THC relative to the application—and throughout the review and productions processes—will be via direct communication with the CHC representative. All other inquiries (calls, emails, letters) to the THC will be referred to the CHC representative for response. By filling out the information below and filing the application with the THC, the CHC representative is providing the THC with notice that the application and documentation have been reviewed and verified by the CHC and that the material meets all current requirements of the Official Texas Historical Marker program.

**As chair or duly appointed marker chair, I certify the following:**

☐ Representatives of the CHC have met or talked with the potential marker sponsor and discussed the marker program policies as outlined on the THC web site. CHC members have reviewed the history and documentation for accuracy and made corrections or notes as necessary. It is the determination of the CHC that the topic, history and documentation meet criteria for eligibility.

**CHC comments or concerns about this application, if any:**

**Name of CHC contact (chair or marker chair):** Charles W. Powers

**Mailing address:** 8742 Hackney Lane  City, Zip: Dallas, TX 75238-3704
Daytime phone (with area code): 214-348-4348  Email address (required):
powersc@sbcglobal.net

PERMISSION OF PROPERTY OWNER FOR MARKER PLACEMENT
Will the marker be placed on right-of-way maintained by the Texas Department of Transportation (TxDOT)? [ ] Yes [x] No
If the answer is yes, the THC will secure the necessary permission from TxDOT, and no other information is required. If the answer is no, please provide the following information for the person or group who owns the property.

Property owner: Barry N. Henry, C H Woodlawn Office, L.L.C.

Address: 3819 Maple Street  City, State, Zip: Dallas, TX 75219

Phone: 214-661-8000  Email address: bhenry@CrowHoldings.com

NOTE: The property owner will not receive copies of correspondence from the THC. All correspondence—notice of receipt, request for additional information, payment notice, inscription, shipping notice, etc.—will be sent via email to the CHC representative, who is encouraged to share the information with all interested parties as necessary. Given the large volume of applications processed annually and the need for centralized communication, all inquiries about applications in process will be referred to the CHC for response. The CHC is the sole liaison to the THC on all marker application matters.

SPONSORSHIP PAYMENT INFORMATION
Prospective sponsors please note payment must be received in full within 45 days of the official approval notice and be accompanied by the THC payment form. The THC is unable to process partial payments or to delay payment due to processing procedures of the sponsor. Applications not paid in the time frame required may, at the sole discretion of the THC, be cancelled or postponed.

▪ Payment does not constitute ownership of a marker; Official Texas Historical Markers are the property of the State of Texas.
▪ If, at any time during the marker process, sponsorship is withdrawn, a refund can be processed, but the THC will retain the application fee of $100.
▪ The Official Texas Historical Marker Program provides no means of recognizing sponsors through marker text, incising or supplemental plaques.

Marker sponsor (may be individual or organization): Crow Holdings

Contact person (if applicable): Mandy Lemmond

Mailing address: 3819 Maple Street  City, State, Zip: Dallas, TX 75219

Phone: 214-661-8000  Email address (required): mlemmond@CrowHoldings.com

SHIPPING INSTRUCTIONS
If the proposed marker site is on TxDOT right-of-way, the marker will be shipped directly to the district highway engineer for placement, with consultation from the CHC. If the marker will go on property other than TxDOT right-of-way, provide full information in the space below. In order to facilitate delivery of the marker, neither post office box numbers nor rural route numbers can
be accepted. To avoid additional shipping charges or delays, use a business street address (open 8 a.m.-5 p.m., Monday through Friday).

Name: Mandy Lemmond, Crow Holdings
Street address: 3819 Maple Street  City, zip: Dallas, TX 75219
Daytime phone (required): 214-661-8000  Email (required): mlemmond@crowholdings.com

TYPE AND SIZE OF SUBJECT MARKER
As part of its review process, the THC will determine the appropriate size of the marker and provide options, if any, for the approved topic based on its own review criteria, including, but not exclusive of, historical significance, replication of information in other THC markers, relevance to the Statewide Preservation Plan and the amount of available documented information provided in the application narrative. In making its determination, however, the THC will also take into account the preference of the CHC, as noted below.

The sponsor/CHC prefers the following size marker:
- [ ] 27" x 42" subject marker with post ($1,500)
- [ ] 27" x 42" subject marker without post*($1,500)
- [ ] 18" x 28" subject marker with post ($1,000)
- [X] 18" x 28" subject marker without post* ($1,000)

*For a subject marker without post, indicate to what surface material it will be mounted:
- [ ] wood
- [ ] masonry
- [X] metal
- [ ] other (specify)

*For markers without posts, the CHC must receive prior approval from the THC for the planned placement. Such prior approval is based on the following:
- Submittal of a detailed plan for where the marker will be mounted, including the surface to which it will be placed (masonry, metal, wood); and
- A statement of why a marker with a post is not feasible or preferred.

SUBMITTING THE APPLICATION (via email required)
When the CHC has determined the application is complete, the history has been verified and the topic meets the requirements of the Official Texas Historical Marker Program, the materials should be forwarded to the THC via email at the following address:

- The CHC or marker chair should send an email containing the following attachments (see attachment function under file menu or toolbox on your computer):
  - This application form
  - The subject history (including documentation)

RECORDS RETENTION BY CHC:
The CHC must retain hard copies of the application, as well as an online version, at least for the duration of the marker process. The THC is not responsible for lost applications, incomplete applications or applications not properly filed according to the program requirements. For additional information about any aspect of the Official Texas Historical Marker Program, visit the Markers page on the THC web site (http://www.thc.state.tx.us/markerdesigns/madmark.html).
Texas Historical Commission
History Programs Division
P.O. Box 12276, Austin, TX 78711-2276
Phone 512/463-5853
history@thc.state.tx.us
Registered Texas Historical Marker Application
for
"Old" Parkland Hospital (3819 Maple Street, Dallas, TX)

CONTEXT

The turn of the 20th century represented a time of enormous transformation for American hospitals. In the 19th century, people needing medical treatment received it at home. Hospitals functioned largely in conjunction with almshouses to remove the indigent from greater society. Health care providers were well-meaning but largely nonprofessional. Treatments were informed by the miasma theory of disease and relied primarily on passive exposure to fresh air. This changed by the first decade of the 20th century. Medicine was now professional, science-based and technologically-advanced. Treatment strategies embraced the germ theory of disease which led to a pro-active treatment strategies. Staff was professionally trained with improved education and consistent standards of treatment and care. Hospitals became the core and demonstration of a modern city's appreciation of and commitment to public health.¹

When Parkland first opened on its present site in the late 1890s, the city hospital reflected the older 19th century values. By 1913, however, when Dallas built this current structure, the city intended its hospital to be "one of the most modern and best equipped institutions of its kind in the Southwest." Dallas was not simply investing in a building, but rather saw "the erection of a new hospital building commensurate with the needs of the city at present and for future growth."²

This facility remained the city's only public hospital until 1954, when Parkland, the institution, moved to its new and current site. Until that time, the hospital expanded physically and professionally. Throughout the years, Dallas continued to embrace the values of medicine as science and of a commitment to offer its citizens excellence in public health care. This ongoing
commitment and the place of Parkland in the medical community then spawned ancillary medical development in the surrounding neighborhood - ultimately leading to the area developing a reputation as "hospital row".3

OVERVIEW

"Old" Parkland Hospital was designed by noted Dallas architects Hubbell & Greene and built in 1913. It was the third City Hospital building. The first opened in 1874 in a two-story school building on Lamar Street. Twenty years later, the city replaced it with a rural complex of wood cottages on the site of this building.4

The present 1913 hospital reflected the transformation to modern medical care. A state of the art facility, it was the city’s first fireproof hospital with two operation rooms, sterilizing room, laboratory as well as patient rooms and wards. From its onset, the hospital embraced continued collaborative efforts to strengthen its medical services: In 1914, a cooperative agreement was established with the medical schools of Southern Methodist University and Baylor University to install and maintain an X-ray machine, a pathological laboratory and a pharmacy. A defining aspect of Parkland was that it offered free medical service to the City’s needy and indigent: “Hospital facilities equal in practically every respect to the very best the rich and the well-to-do can secure in private, endowed or charity hospitals, are available for the poor of the city – and other Dallas citizens – at Parkland Hospital. . . . The city institution not only compares favorably in efficiency with municipal hospitals throughout the country, but is on a par with the best hospitals of all classes.”5

The city's commitment to the hospital continued through the ensuing decades as it expanded the facility to meet the growing population. Between 1910 and 1920, the city grew by 73%. In 1922, to secure a quality nursing corps, the Nurses' Quarters was built to the north. It
featured a full basement with classroom and offices, a first floor with reception, parlors and bedrooms and a second floor with 26 bedrooms and shared baths. Shortly after, the hospital added three identical wings, tripling the patient capacity of the hospital. In 1930, a laundry and new operating room was added. And in 1936, additional construction included adding a third floor to the nurses’ home and extending the northern and southernmost wings of the hospital 170 feet to the west.  

Through this era, the area surrounding Parkland developed from its bucolic beginnings, rapidly transforming into a medical district. When the Parkland Hospital site was developed in 1893, the site was chosen for its isolated setting on wooded land. Access to the hospital from downtown was by ungraded roads. In short order, the surrounding areas to the north and east developed as the Oak Lawn neighborhood. However, as Parkland expanded, the surrounding neighborhood quickly became a medical center. "Maple Avenue in the vicinity of Parkland Hospital is rapidly becoming what might be termed ‘hospital row’ and by early spring this part of the city will represent one of the largest and most complete hospital centers in the Southwest."

That this growth occurred adjacent to the City Hospital however illustrates the catalytic nature of Parkland.  

By the 1920s, Maple Avenue saw three new medical projects: The Richmond Freeman Memorial Hospital was located directly south of Parkland, across Oak Lawn Avenue at Maple Avenue and Welborn Street. At the same intersection was the Carrell-Driver Clinic and Reconstruction Hospital. Southeast of the intersection was Hope Cottage, a facility for the care of “foundling children”. Already in the neighborhood were the Hella Temple Children’s Hospital, later known as Shriners’ Hospital for Crippled Children and the Dallas Baby Camp, designed for the care of children suffering from diseases and undernourishment. Then lining
Fairmount from Oak Lawn south for three blocks were 17 separate medical clinics. By 1925, the Dallas Morning News could claim, “No other city in the United States has within an area of a few city blocks so many hospital units as are located in the vicinity of Parkland Hospital.”

Further extending the area as a medical center was the arrival of the Southwestern Medical College on the Parkland campus. At first, the school operated in temporary wood huts on the west side of the complex while using the hospital building as its teaching facility. When a new state medical school was proposed after World War II, leaders of Southwestern Medical Foundation enticed the University of Texas to Dallas and in 1949 the college became Southwestern Medical School of the University of Texas, the 68th medical college in the United States.

By the 1950s, however, Parkland Hospital was technologically, functionally, architecturally ancient. The modern hospital in post-World War II America was a healing factory, a place for intensive, specialized, short-term care under the direct supervision of several medical professionals. Treatment was purposeful, often driven by specialized equipment by professionals with specialized skills. The modern hospital building needed to be efficient with controlled environments. Architecturally, hospitals were to evoke cleanliness, modernity, and professionalism. A forward looking Dallas did not see the “colonial” Parkland as reflecting such values and in April, 1952, ground was broken for the current Parkland Hospital located at 5201 Harry Hines Boulevard.

SIGNIFICANCE

Opening in 1913, "Old" Parkland Hospital is the city's oldest hospital building. Designed in the colonial revival style, its development represented the city government's embrace of modern 20th century medical practices while also attempting to elevate the city's place in the
hierarchy of modern metropolises. The hospital is also important as the source for the
development of the surrounding neighborhood as a medical center. At its peak in the 1920s, the
area was known as "hospital row" and featured six major medical facilities and 17 medical
clinics. It also served as the first home to Southwestern Medical College (now University of
Texas Southwestern Medical Center).

DOCUMENTATION

1. Charles Rosenberg, The Care of Strangers (Baltimore, MD: Johns Hopkins Press, 1987);
University Press, 1999); Paul Starr, The Social Transformation of American Medicine (New
York: Basic Books, Inc., 1982); John Thompson and Grace Goldon, The Hospital: A Social and


Dallas, Texas; www.utsouthwestern.edu/utsw/cda/dept117179/files/384463.html.

4. Dallas Morning News, November 28, 1893, p. 8; April 9, 1894, p. 8; May 19, 1894, p. 8; May
20, 1894, p. 11; October 1, 1925, p. 20.


6. Dallas Morning News, February 10, 1918, p. 5; September 15, 1920, p. 8; November 18,
1920, p. 2; March 16, 1921, p. 12; April 17, 1921, p. 4; May 19, 1921, p. 9; June 6, 1921, p. 2;
June 25, 1921, p. 17; July 19, 1921, p. 18, September 15, 1920, p. 8; November 18, 1920, p. 2;
December 28, 1920, p. 6; November 27, 1921, p. 12; December 6, 1921, p. 13; January 3, 1922,
p. 4; January 21, 1922, p. 4; July 12, 1922, p. 13; March 17, 1926, p. 13; April 28, 1926, p. 13;
August 31, 1928, p. 13; October 27, 1932, p. 1; September 9, 1933, p. 7; October 27, 1932, p. 1;
September 9, 1933, p. 7; March 12, 1934, p. 2; July 18, 1934, p. 1; December 12, 1934, p. 4;
Form: "Old" Parkland Hospital.

Dallas, Texas; http://www.utsouthwestern.edu/utsw/cda/dept117179/files/384463.html.

8. Ibid.

9. http://www.utsouthwestern.edu/utsw/cda/dept117179/files/384463.html; City of Dallas
Historic Landmark Nomination Form: "Old" Parkland Hospital.
MOUNTING DETAIL
PLACEMENT
HISTORIC MARKER

EXISTING SIGNAGE IN IMMEDIATE PROXIMITY
PRECEDENT

LOCATION OF HISTORIC SIGN
SITE PLAN

PROXIMITY TO ADJACENT SIGNAGE

PROXIMITY TO ADJACENT SIGNAGE

CROW HOLLOW'S REQUESTED APPROVAL TO CREATE A SIMILAR MONUMENT FRAME FOR THE SIGN
DUE TO ESTABLISH SIGNAGE DESIGN AND CLOSE PROXIMITY TO ADJACENT SIGNS AND METAL
BLACK METAL AND DECORATIVE FITTINGS THAT EMPHASIZE THE HISTORIC NATURE OF THE SITE
OLD PARKLAND CAMPUS HAS ESTABLISHED A SIGNAGE PACKAGE USING A VERNACULAR OF
HISTORIC MARKER TO BE LOCATED PROMINENTLY AT THE LANDMARK'S VISITOR PARKING
STATEMENT