Finding of Effect for Long Range Development Plan

San Francisco Veterans Affairs Medical Center

Prepared for:
San Francisco Veterans Affairs Medical Center

Prepared by:
AECOM

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1. INTRODUCTION

The U.S. Department of Veterans Affairs (VA) is preparing a Long Range Development Plan (LRDP) for the San Francisco Veterans Affairs Medical Center (SFVAMC) at Fort Miley in San Francisco, California. The SFVAMC, which is located in northwestern San Francisco, is a major tertiary care facility that serves as a VA regional referral center for specialized medical and surgical programs. The SFVAMC serves Veterans of the San Francisco Bay Area and northern California coast counties.

The proposed undertaking is an LRDP that supports the mission of the SFVAMC and provides for the healthcare needs of the Veterans it serves. An LRDP is a comprehensive plan that guides physical development such as the location of buildings, open space, circulation, and other land uses. The LRDP for the SFVAMC includes new development and the retrofit of existing buildings and structures that house patient care, research, administrative, and hoptel\(^1\) functions, as well as parking. Implementation of the LRDP would occur in two phases over a 10-year timeframe, through the year 2023. The LRDP is a conceptual planning document that provides a present-day analysis and offers a visionary sketch for a better future. The LRDP is a living, dynamic document, one that will outline a sequence of steps for implementation in both the short and long term, while also providing the institution flexibility to shift priorities as needed. The LRDP is anticipated to go through many changes in the future, as priorities shift to meet the needs of Veterans.

The purpose of the LRDP is to provide a strategic and organized approach for the future development necessary to meet the mission of the Veterans Health Administration (VHA), one of three major VA branches. To meet the needs of Veterans in the San Francisco Bay Area and northern California over the next 20 years, SFVAMC has determined that existing buildings need to be retrofitted to the most recent seismic safety requirements and that an additional 589,000 square feet of building space must be constructed.

Per the requirements of Section 106 of the National Historic Preservation Act (NHPA), VA has initiated consultation on the development of the LRDP. The LRDP Finding of Effect (FOE) report will be used to consult with Section 106 consulting parties about VA’s determination of whether the LRDP will adversely affect historic properties.

1.1 PREVIOUS SECTION 106 COMPLIANCE ACTIVITIES

On April 22, 2011, VA contacted the California State Historic Preservation Officer (SHPO) by letter to initiate Section 106 consultation for the SFVAMC Draft Institutional Master Plan (IMP), which was a preliminary planning document that has evolved into the LRDP. On June 16, 2011, SHPO responded with a letter requesting additional information.

In December 2011, AECOM prepared baseline documentation that summarized the previous cultural resources studies and Section 106 consultations that were conducted for the SFVAMC.

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\(^1\) A hoptel is an overnight, shared lodging facility for eligible Veterans receiving health care services. This temporary lodging is available to Veterans that need to travel 50 or more miles from their home to the SFVAMC Fort Miley Campus.
Also in December 2011, VA met with SHPO personnel at the SFVAMC Fort Miley Campus to review the baseline documentation and tour the site.

After extensive discussions with the public and interested agencies, VA determined that an LRDP is the more appropriate planning tool for its purposes. As such, an LRDP replaced the Draft IMP as the principal master-planning document for the SFVAMC Fort Miley Campus. The first public review of the LRDP is scheduled to occur in summer 2012 at the same time as the review of the Public Draft Environmental Impact Statement (EIS) and Public Draft LRDP FOE.

Per the requirements of Section 106 of the NHPA, 36 Code of Federal Regulations (CFR) 800.3, VA formally initiated Section 106 consultation for the LRDP in a March 2012 letter to the SHPO. In May 2012, SHPO submitted a letter to VA that stated concurrence with the established Area of Potential Effect (APE), the definition of the proposed undertaking, and VA’s approach to the Section 106 process.

### 1.2 SUMMARY FINDING OF EFFECT

Pursuant to NHPA Section 106, 36 CFR 800.5, VA has determined that the LRDP will have an adverse effect on the SFVAMC Historic District. The LRDP will have no adverse effect on the Fort Miley Military Reservation Historic District or archaeological historic properties. Pursuant to Section 106, 36 CFR 800.6(a), and 800.6(b)(1), VA will consult with SHPO and those parties designated as signatory consulting parties regarding the resolution of adverse effects.

An Administrative Draft LRDP FOE was coordinated with the Section 106 signatory consulting parties prior to public release of the Draft LRDP FOE. The Draft FOE will be released for public review concurrently with the Draft EIS, which is currently being prepared per compliance with the National Environmental Policy Act (NEPA). VA will conduct an integrated public input process, with a concurrent Draft LRDP EIS and Draft LRDP FOE review period and a combined public meeting. Comments provided by the public, concurring consulting parties, and signatory consulting parties will be incorporated into the Final FOE that will be submitted to SHPO with a request for concurrence. The Section 106 process will conclude when VA, SHPO, and the signatory consulting parties execute an agreement document for the resolution of adverse effects (or through concurrence that there are no adverse effects).

Table 1, “Findings of Effect,” provides a summary of the findings of effect for each National Register of Historic Places (NRHP) historic property located within the APE. The summary includes a brief statement of how the LRDP would impair individual components of the NRHP Historic District located within the APE.
**Table 1: Findings of Effect**

<table>
<thead>
<tr>
<th>Archeological Sites</th>
<th>No Historic Properties Affected</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fort Miley Military Reservation Historic District</strong></td>
<td>No Adverse Effect</td>
</tr>
<tr>
<td>West Fort Miley - Battery Chester (FI-1, FI-2)</td>
<td>Not impaired by LRDP activities</td>
</tr>
<tr>
<td>West Fort Miley - Battery 243 (FI-4)</td>
<td>Not impaired by LRDP activities</td>
</tr>
<tr>
<td>West Fort Miley - Searchlight Powerhouse (FI-3)</td>
<td>Not impaired by LRDP activities</td>
</tr>
<tr>
<td>West Fort Miley - Fire Control Station (FI-350)</td>
<td>Not impaired by LRDP activities</td>
</tr>
<tr>
<td>West Fort Miley - Fire Control Station (FI-351)</td>
<td>Not impaired by LRDP activities</td>
</tr>
<tr>
<td>West Fort Miley - Fire Control Station (FI-352)</td>
<td>Not impaired by LRDP activities</td>
</tr>
<tr>
<td>West Fort Miley - Unidentified earthworks</td>
<td>Not impaired by LRDP activities</td>
</tr>
<tr>
<td>East Fort Miley - Battery Livingston (FI-329)</td>
<td>Not impaired by LRDP activities</td>
</tr>
<tr>
<td>East Fort Miley - Battery Springer (FI-330)</td>
<td>Not impaired by LRDP activities</td>
</tr>
<tr>
<td>East Fort Miley - Ordnance Storehouse (FI-304)</td>
<td>Not impaired by LRDP activities</td>
</tr>
<tr>
<td>Historic District feeling, setting, association</td>
<td>Not impaired by LRDP activities</td>
</tr>
<tr>
<td><strong>SFVAMC Historic District</strong></td>
<td>Adverse Effect</td>
</tr>
<tr>
<td>Building 1 (Administration, Research)</td>
<td>Alteration of physical and setting characteristics</td>
</tr>
<tr>
<td>Building 2 (Administration, Clinics, Research)</td>
<td>Not impaired by LRDP activities</td>
</tr>
<tr>
<td>Building 3 (Engineering)</td>
<td>Not impaired by LRDP activities</td>
</tr>
<tr>
<td>Building 4 (Research)</td>
<td>Alteration of setting characteristics</td>
</tr>
<tr>
<td>Building 5 (Clinic, Research)</td>
<td>Alteration of physical characteristics</td>
</tr>
<tr>
<td>Building 6 (Research, Library)</td>
<td>Alteration of physical and setting characteristics</td>
</tr>
<tr>
<td>Building 7 (Various)</td>
<td>Alteration of physical characteristics</td>
</tr>
<tr>
<td>Building 8 (Mental Health, Clinic)</td>
<td>Alteration of physical and setting characteristics</td>
</tr>
<tr>
<td>Building 9 (Hoptel)</td>
<td>Alteration of physical characteristics</td>
</tr>
<tr>
<td>Building 10 (Hoptel)</td>
<td>Alteration of physical characteristics</td>
</tr>
<tr>
<td>Building 11 (Research/Offices)</td>
<td>Alteration of physical characteristics</td>
</tr>
<tr>
<td>Building 18 (Office)</td>
<td>Demolition</td>
</tr>
<tr>
<td>Building 20 (Storage)</td>
<td>Demolition</td>
</tr>
<tr>
<td>Flag Pole and Base</td>
<td>Not impaired by LRDP activities</td>
</tr>
<tr>
<td>Historic District feeling, setting, association</td>
<td>Alteration of physical and setting characteristics</td>
</tr>
</tbody>
</table>
2. DESCRIPTION OF PROPOSED UNDERTAKING

2.1 PROJECT LOCATION

The SFVAMC is a 29-acre site located in the northwestern corner of the City and County of San Francisco, adjacent to the Outer Richmond District neighborhood (see Exhibit 1, “Project Location”). It is bounded by Clement Street/Seal Rock Drive and the outer Richmond District neighborhood to the south, and Golden Gate National Recreation Area (GGNRA) land, which is owned by the National Park Service (NPS), to the north, east, and west (see Exhibit 2, “Existing SFVAMC Campus”).

2.2 AREAS OF POTENTIAL EFFECT

The LRDP includes planned improvements (see Exhibit 3, “Summary Site Plan”) within and adjacent to the SFVAMC Historic District and adjacent to the Fort Miley Military Reservation Historic District, which is a listed NRHP district that is administered by the NPS. The proposed archaeological and architectural APEs have been drawn to include the entire SFVAMC Fort Miley Campus, which encompasses the construction footprint and all construction areas and any buildings or structures adjacent to those areas where potential LRDP-related effects may occur (see Exhibit 4, “Areas of Potential Effect”).

Due to the proximity of the Fort Miley Military Reservation Historic District boundary to the SFVAMC Fort Miley Campus, there is some potential to affect the setting, feeling, or association of the Historic District through implementation of the LRDP. This potential is significantly reduced on the north and northwest sides of the SFVAMC Fort Miley Campus because of a dramatic drop in topography that renders the Campus difficult to see from that portion of the adjacent Fort Miley Military Reservation Historic District. Thus, the architectural APE extends into a portion of GGNRA land, northeast and east of the Campus. The architectural APE also extends southwest of the Campus—to include residential buildings immediately adjacent to the Campus boundary—to account for potential effects on setting, feeling, and association of these buildings if they qualify as historic properties.

2.3 SFVAMC BACKGROUND

The mission of the VHA is to “Honor America’s Veterans by providing exceptional health care that improves their health and well-being.” In fulfillment of this mission, VHA provides comprehensive, integrated healthcare services to Veterans and other eligible persons. The SFVAMC carries out the mission of VHA by providing the medical, educational, and research space necessary for care of military Veterans in the San Francisco Bay Area and northern California.
Source: SFVAMC Engineering Department

Existing SFVAMC Campus

Exhibit 2
Summary Site Plan

San Francisco VA Medical Center

LEGEND
- Site Boundary
- National Register Historic District Boundary
- New Construction
- Expansion
- Retrofit
- No Action
- Demolition/Removal

Exhibit 3
Since 1930, the VA healthcare system has grown from 54 hospitals to include 152 medical centers; more than 1,400 outpatient clinics; 135 nursing home care units (Community Living Centers); and 48 domiciliaries. The growing population of Veterans (both service-connected and nonservice-connected) seeking VA healthcare services results in an increase in the demand for medical facilities, including research space, on VA medical center campuses.

VA constructed and continues to operate the SFVAMC, which is located at Fort Miley in San Francisco, California. Fort Miley was established as a Coastal Defense Battery in 1893. Approximately 29 acres of land were transferred from the U.S. Army to VA in 1932 for construction of a new Veterans hospital and diagnostic center to provide healthcare options to the San Francisco Bay Area Veteran population. In 1934, this area became the SFVAMC and was included in VA’s VHA system.

SFVAMC is the only VA medical center in San Francisco County, and serves Veterans throughout northern California. The SFVAMC is an approximately 1 million-square foot facility that includes a 124-bed tertiary care hospital, primary and specialty care services, and a 120-bed Community Living Center. The SFVAMC has a long history of conducting cutting-edge research, establishing innovative medical programs, and providing compassionate care to Veterans. The SFVAMC has several National Centers of Excellence in the areas of epilepsy treatment, cardiac surgery, post-traumatic stress disorder, human immunodeficiency virus, and renal dialysis. It has many other nationally recognized programs; is one of the few medical centers in the world equipped for studies using both whole-body magnetic resonance imaging and spectroscopy; and is the site of VA’s National Center for the Imaging of Neurodegenerative Diseases.

The SFVAMC is considered an aged facility with the need for retrofitting and expansion. The SFVAMC is severely deficient in space and has identified a deficiency of 589,000 square feet of building space to adequately serve San Francisco Bay Area and northern California coast Veterans through the year 2030.

2.4 DESCRIPTION OF PROPOSED UNDERTAKING

The purpose of the LRDP is to establish the road map for the SFVAMC facility development projects necessary to meet the mission of VHA. SFVAMC has determined that to meet the needs of all San Francisco Bay Area and North Coast Veterans over the next 20 years, some of the existing buildings need to be retrofitted to the most recent seismic safety requirements, and an additional 589,000 square feet of building space must be constructed.

SFVAMC has major space and parking deficiencies at the Fort Miley Campus. The mission of the SFVAMC is to continue to be a major primary and tertiary healthcare center that provides cost-effective and high-quality care to eligible Veterans in the San Francisco Bay Area and northern California coast. The SFVAMC strives to deliver necessary care to Veterans while contributing to healthcare knowledge through research and education. SFVAMC is also a ready resource for Department of Defense backup, serving as a Federal Coordinating Center in the

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2 A domiciliary provides residential rehabilitation treatment programs for a wide range of problems including: medical, psychiatric, vocational, educational, and social.
event of a national emergency. New major construction initiatives would transform the SFVAMC, providing seismic improvements and additional facility space over the next 20 years. The proposed LRDP is needed for the SFVAMC to continue to serve the ever-changing needs of the growing Veteran population and to provide appropriate space and facilities to conduct important research.

The overarching goals of the LRDP include:

- Enhance the SFVAMC’s function as a vital medical center for Veterans in need.
- Continue to be a state-of-the-art medical facility to serve Veterans well into the future.
- Provide appropriate space to conduct/manage research, clinical, administrative, and educational programs.

The specific objectives of the LRDP are to:

- Address the space deficiency at the SFVAMC Fort Miley Campus.
- Retrofit existing buildings to the most recent seismic safety requirements to meet current VA Seismic Design Requirements (VA Directive H-18-8), in compliance with Executive Order 12941.
- Provide appropriate space to conduct research.
- Strengthen clinical inpatient and outpatient primary and specialty care for San Francisco Bay Area and North Coast Veterans.
- Improve the efficiency of clinical and administrative space through renovation and reconstruction.
- Meet patient privacy standards and resolve Americans with Disability Act deficiencies;
- Increase parking supply to meet current and future demands.
- Improve internal and external campus circulation, utilities, and infrastructure.
- Maintain/improve public transit access to the SFVAMC Fort Miley Campus.

2.5 PROJECT ALTERNATIVES

In parallel with coordination of Section 106 review, VA is conducting review under NEPA with preparation of an EIS. NEPA regulations require that an EIS contain a description of a proposed action and the alternatives considered. Agencies are directed to use the NEPA process “to identify and assess the reasonable alternatives to proposed actions that will avoid or minimize adverse effects of these actions upon the quality of the environment” (40 CFR 1500.2[e]).

The NEPA proposed action is the renovation, expansion, and operation of the SFVAMC to serve Veterans in the San Francisco Bay Area and northern California coast counties. After consideration of a variety of alternatives through the planning process and eliminating alternatives determined to be infeasible, three alternatives were derived that would allow for continued operation of the SFVAMC over the next 20 years:

**Alternative 1:** SFVAMC Fort Miley Campus Buildout Alternative

**Alternative 2:** SFVAMC Fort Miley Campus Plus Mission Bay Campus Alternative

**Alternative 3:** No Action Alternative
There is no preferred alternative at this time. Once VA has gained input from the public and coordinating agencies (including Section 106 consulting parties) through the NEPA and Section 106 public processes, VA will update the LRDP, as necessary, select a preferred alternative, and prepare and sign a Final EIS and Record of Decision. VA will also finalize the FOE with an updated description of the Section 106 undertaking that reflects the revised preferred alternative.

To facilitate Section 106 consultation concurrent with the NEPA process, this Draft FOE discusses effects on historic properties located within the APE at the SFVAMC Fort Miley Campus as well as the Section 106 implications of LRDP alternatives that consider off-site development at an as-yet-unknown specific location. Because Section 106 does not require analysis of a “no action” alternative, only NEPA Alternatives 1 and 2 are discussed in the Section 106 FOE.

### 2.5.1 Alternative 1: SFVAMC Fort Miley Campus Buildout Alternative

#### Near-Term Projects

Alternative 1 near-term project components (Phase 1) would involve new development and/or retrofit of patient care, research, administrative, hotel, and parking structures on the existing 29-acre SFVAMC Fort Miley Campus through mid 2015. The Alternative 1 (Phase 1) development area would total under 1.5 net new acres within the previously developed areas of the existing 29-acre SFVAMC Fort Miley Campus (see Exhibit 3, “Summary Site Plan”).

Alternative 1 near-term projects include:

- Phase 1.1: Building 41 Research (requires demolition of Building T-17)
- Phase 1.2: Emergency Operations Center and Building 211 Parking Garage Expansion (477 spaces; 295 net new)
- Phase 1.3: Building 22 Hotel and Seismic Retrofit of Buildings 5, 7, 9, 10, 11, and 13, in accordance with VA Seismic Design Requirements (VA Directive H-18-8), in compliance with Executive Order 12941
- Phase 1.4: Patient Welcome Center and Drop-Off Area
- Phase 1.5: Building 24 Mental Health Clinic Expansion (requires demolition of Building 20)

#### Long-Term Projects

The Alternative 1 long-term project components (Phase 2) would involve new development and/or retrofit of patient care, research, administrative, and ambulatory care structures on the 29-acre SFVAMC Fort Miley Campus through 2023. The Alternative 1 (Phase 2) development area would total approximately 0.5 net new acre within the previously developed areas of the existing 29-acre SFVAMC Fort Miley Campus.

Furthermore, there would be a need to add approximately 24,000 square feet of modular building swing space into the northwest parking lot of the SFVAMC Fort Miley Campus. This modular swing space would be temporary, as it would be removed from the northwest parking lot after approximately 13 months. The use of this modular swing space would not require any

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3 LRDP Phase 1 spans the 2013 through 2015 timeframe. LRDP Phase 2 spans the 2015 through 2023 timeframe.
construction or demolition of buildings because it would be located on a previously developed parking lot which can accommodate the use.

Alternative 1 long-term projects include:

- Phase 2.1: Operating Room Expansion (D-Wing)
- Phase 2.2: IT Support Space Expansion (Building 207)
- Phase 2.3: Building 23 (Mental Health Research Expansion)
- Phase 2.4: Building 40 Research (requires demolition of Buildings 12, 18, 21, and T-23, and removal of Building 14) and Seismic Retrofit of Buildings 1, 6, and 8, in accordance with VA Seismic Design Requirements (VA Directive H-18-8), in compliance with Executive Order 12941
- Phase 2.5: Ambulatory Care Center (ACC)

2.5.2 Alternative 2: SFVAMC Fort Miley Campus Plus Mission Bay Campus Alternative

Near-Term Projects

Alternative 2 near-term project components (Phase 1) would be the same as Alternative 1 near-term project components (Phase 1). Thus, all Alternative 2 near-term project components (Phases 1.1 through 1.5) would be located at the SFVAMC Fort Miley Campus.

Long-Term Projects

The Alternative 2 long-term project components (Phase 2) would primarily involve new development and/or retrofit of patient care, research, and administrative structures at the SFVAMC Fort Miley Campus as well as ambulatory care, research, and parking structures at a potential new SFVAMC Mission Bay Campus.

For purposes of the Section 106 analysis, it is assumed that a new SFVAMC Mission Bay Campus would be constructed somewhere within an approximately 2.5-square mile area bounded by Interstate-80 on the north, 2nd Street and San Francisco Bay on the east, Cesar Chavez Street on the south, and 7th/Brannan/Potrero Streets on the west. See Exhibit 5, “Alternative 2 Mission Bay Campus Location,” for the location of the off-site portion of Alternative 2. In addition, it is assumed that all off-site space in Mission Bay would be four stories, with the proposed off-site new development area totaling approximately 3.5 acres. The actual footprint, concept plan, and site location within Mission Bay have not been determined at this time.

Alternative 2 long-term project components (Phase 2) at the SFVAMC Fort Miley Campus would be constructed between late 2015 and early 2023, while a new SFVAMC Mission Bay Campus would be constructed roughly between mid 2023 and late 2027.
Alternative 2 Mission Bay Campus Location
3. CONSULTATION AND PUBLIC PARTICIPATION

3.1 CONSULTATION AND PUBLIC INVOLVEMENT PROCESS

In accordance with VA’s responsibilities under both Section 106 and NEPA, VA is required to solicit public comments on the environmental review documents that will, in turn, facilitate the incorporation of comments into the Final LRDP and Final LRDP EIS. This process includes coordination with agencies and organizations with a demonstrated interest in heritage resources or in the SFVAMC Fort Miley Campus. This process also includes providing members of the public with similar interests an opportunity to comment on the identification of historic properties and finding of effect. VA will take those comments into consideration during consultation with SHPO under Section 106.

3.1.1 Consulting Parties

During the early stages of the development of the LRDP, VA identified organizations that have a demonstrated interest in the treatment of historic properties in San Francisco. These early efforts include the NEPA scoping meetings held in late 2010 and early 2011 and individual meetings held with NPS GGNRA and the City and County of San Francisco in late 2011. Based on these meetings, as well as input provided by SHPO, VA submitted letters to the following parties on June 15, 2012, notifying them of their opportunity to participate in the Section 106 process:

- City and County of San Francisco (Certified Local Government)
- San Francisco Veterans Affairs Commission
- NPS, Western Regional Office
- GGNRA
- Planning Association for the Richmond
- Friends of Lands End
- California Preservation Foundation
- National Trust for Historic Preservation, Western Regional Office
- NCIRE (The Veterans Health Research Institute) Board of Directors
- University of California at San Francisco (UCSF) Medical School
- Legion of Honor
- Presidio Trust
- San Francisco County Veterans Service Officers

Responses to these letters may lead to the identification of consulting parties who would become signatories to the agreement document that will be developed during the resolution of adverse effects (if warranted). At this time, we assume that NPS would be a consulting/signatory party by virtue of GGNRA’s proximity to the SFVAMC Fort Miley Campus and status as a federal agency.

3.1.2 Public Involvement

VA solicited input from the general public through the standard NEPA public involvement process. Opportunities for public comment have already been provided through the posting of a Notice of Intent to Prepare an EIS in the Federal Register and the EIS public scoping meetings. The Draft EIS will be circulated for a 60-day public review period (longer than the standard 45-
day period), and a Draft EIS public meeting will be held during that review period. The Section 106 Baseline Documentation package and Draft FOE will be available via the SFVAMC website, and VA will have copies available for review at the Draft EIS public meeting. Members of the public will be invited to comment on the Section 106 documentation, and their comments will be compiled and provided to SHPO for consideration during SHPO’s review of the FOE.

3.2 CONSIDERATION OF ISSUES RAISED THROUGH CONSULTATION AND PUBLIC INVOLVEMENT

At this time, VA has not received any public comments on the Section 106 review process. Future versions of this document will emphasize the cultural resources issues discussed at public meetings, and, if concerns are raised, discuss steps taken to ensure that public concerns are incorporated into the Section 106 process.

4. DESCRIPTION OF HISTORIC PROPERTIES

4.1 HISTORIC CONTEXTS

This section provides a brief overview of the prehistoric and historic period context of the SFVAMC, reviews investigations that were previously conducted on the SFVAMC, and summarizes previously identified cultural resources.

4.1.1 Prehistoric Archaeological Context

Few archaeological sites have been found in the San Francisco Bay Area that date to the Paleo-Indian Period or the subsequent Lower Archaic (8000 to 5000 years before present [B.P.]) time period, probably due to high sedimentation rates and sea level rises. Archaeologists have, however, recovered a great deal of information from sites occupied during the Middle Archaic Period (5000 to 2500 B.P.). By this time, broad regional subsistence patterns gave way to more intensive procurement practices. Economies were more diversified, possibly including the introduction of acorn processing technology. Populations were growing and occupying more diverse settings.

Permanent villages that were occupied throughout the year were established, primarily along major waterways. The onset of status distinctions and other indicators of growing sociopolitical complexity mark the Upper Archaic Period (2500 to 1300 B.P.). Exchange systems became more complex and formalized, and evidence of regular sustained trade between groups was seen for the first time.

Several technological and social changes characterized the Emergent Period (1300 to 200 B.P.). Territorial boundaries between groups became well established. It became increasingly common that distinctions in an individual’s social status could be linked to acquired wealth. In the latter portion of this period (500 to 200 B.P.), exchange relations became highly regularized and sophisticated. The clamshell disk bead became a monetary unit, and specialists arose to govern various aspects of production and material exchange.
The Middle Archaic, Upper Archaic, and Emergent periods can be further broken down according to additional cultural manifestations that are well represented in archaeological assemblages in the San Francisco Bay Area:

- The Windmiller Pattern (5000 to 1500 B.P.) peoples placed an increased emphasis on acorn use as well as a continuation of hunting and fishing activities. Ground and polished charmstones, twined basketry, baked-clay artifacts, and worked shell and bone were hallmarks of Windmiller culture. Widely ranging trade patterns brought goods in from the Coast Ranges and trans-Sierran sources, as well as closer trading partners.

- The Berkeley Pattern (2200 to 1300 B.P.) exhibited an increase in the use of acorns as a food source than was seen previously in the archaeological record. Distinctive stone and shell artifacts differentiated it from earlier or later cultural expressions. Burials were predominantly placed in a tightly flexed position and frequently included red ochre.

- The Augustine Pattern (1300 to 200 B.P.) reflected increasing populations resulting from more intensive food procurement strategies, as well as a marked change in burial practices and increased trade activities. Intensive fishing, hunting and gathering, complex exchange systems, and a wider variety in mortuary patterns were all hallmarks of this period.

### 4.1.2 Historic Period Context

The earliest documented Euro-American incursions into what is now the City and County of San Francisco occurred in 1776, when a Spanish exploring party led by Juan Bautista de Anza arrived in the area to locate sites for a presidio (military base) and Mission Dolores. By 1836, the small settlement of Yerba Buena sprang up between the presidio and the mission. In 1847, Yerba Buena became known as San Francisco, and its primary function served as a shipping and transportation hub.

The Gold Rush of 1849 transformed the small shipping community, virtually overnight, into a booming city. Within 1 year, the population exploded from 500 to 25,000. The city continued to grow at a brisk pace over the next few decades, as the population steadily increased from less than 150,000 in 1870 to 342,000 by 1900. By the early 1900s, despite a devastating earthquake and fire, San Francisco boasted a population of 350,000 and served as a major port and financial center on the west coast, a position it enjoys well into the 21st century (Kyle et al. 1990).

In 1850, after California’s entry into the United States, President Fillmore reserved the land comprising Fort Miley for strategic value because it overlooked the entrance to the San Francisco Bay. It remained relatively unused until the 1860s, when the City of San Francisco purchased 200 acres—including the site of the future Fort Miley—for the municipal Golden Gate Cemetery (also known as the City Cemetery Reservation). In 1893, the U.S. Army obtained 54 acres of the Golden Gate Cemetery land from the city to construct a military reservation and coastal artillery batteries. In 1900, the reservation was named Fort Miley after Lieutenant Colonel John D. Miley, one of the planners of San Francisco’s coastal battery network. The Fort Miley post was developed between 1902 and 1906, and included a horseshoe-shaped parade ground and several frame barracks and quarters in the center of the reservation, between the east and west batteries (the current site of the SFVAMC Fort Miley Campus). (See Photographs 1–4 for historic photographs of the Fort Miley post.)
During World War I, the Fort Miley batteries were quickly outdated with the advent of aerial bombardment. Fort Miley is now part of the GGNRA, which is managed by NPS (VA 2003). Bordered by Lands End to the west and Lincoln Park to the north and east, the natural setting of the original military reservation has remained largely intact.

In 1932, VA acquired 29 acres of Fort Miley and began construction of the SFVAMC. When completed, the SFVAMC consisted of several Art Deco buildings that were primarily located in the northern and eastern portions of the site. Few changes occurred at the site until the 1960s, when VA undertook efforts to modernize the SFVAMC through the addition of several new buildings and parking lots, and the modification of existing buildings. (See Photographs 5–10 for historic photographs of the Fort Miley medical center.)

4.2 PREVIOUS INVESTIGATIONS

In 1980, VA conducted a survey of its potential historic properties at the SFVAMC to fulfill the requirements of Section 110 of the NRHP, and concluded that there was an NRHP-eligible historic district in the northeastern portion of the SFVAMC Fort Miley Campus. The district boundaries were altered in 1982 because of the significant construction and renovation work that occurred since the original facility was built. In 1987, the Keeper of the National Register issued a Determination of Eligibility Notification for the SFVAMC. In 2005, a formal NRHP nomination was submitted to the SHPO and the Keeper of the National Register. In May 2005, the SHPO concurred with the finding that the Historic District was eligible for the NRHP under Criterion A in the areas of health and medicine for its association with early 20th century innovative and comprehensive health care for American Veterans, and Criterion C in the areas of architecture and engineering as an early example of a federal complex designed with seismic-resistant building technologies.

In 2008, VA withdrew the original nomination because of physical changes to the SFVAMC Fort Miley Campus, and resubmitted a modified version to the Keeper of the National Register. The updated documentation recommended that the SFVAMC Historic District is eligible under NRHP Criterion A as a site of an early standardized VA hospital, and under Criterion C as an early example of a federal building designed with seismic-resistant buildings technologies and for its Mayan Art Deco-inspired design. The period of significance for the updated district is 1934–1941. The Historic District was listed in the NRHP in April 2009.

A records search was conducted at the Northwest Information Center (NWIC) in June 2010. The NWIC records search indicated that no archaeological resources, sites, or features of Native American cultural importance have been identified at the SFVAMC. Four prehistoric midden sites have been identified and recorded within approximately 0.25 mile of the SFVAMC Fort Miley Campus. The Campus is within the area that was originally the site of the City Cemetery Reservation. The City Cemetery Reservation included a large portion of present-day Fort Miley, Lincoln Park, and the SFVAMC. Records indicate that the burials were removed in 1908; however, construction activities at the Palace of the Legion of Honor (located approximately 0.25 mile to the northeast) uncovered human remains in 1921 and 1993.
Photograph 1: Fort Miley, 1905. View looking south (photograph courtesy of San Francisco Public Library)

Photograph 2: Demolition of barracks buildings at Fort Miley, 1933 (photograph courtesy of San Francisco Public Library)
Photograph 3: Soldiers testing rangefinder at Fort Miley, 1941 (photograph courtesy of San Francisco Public Library)

Photograph 4: Soldiers in front of battery at Fort Miley, 1963 (photograph courtesy of San Francisco Public Library)
Photograph 5: SFVAMC, 1934, view looking southwest (photograph courtesy of San Francisco Public Library)

Photograph 6: Aerial view looking north of SFVAMC, 1935 (photograph courtesy of San Francisco Public Library)
Photograph 7: SFVAMC, 1934, view of Building 2 looking northwest (Photograph courtesy of San Francisco Public Library)

Photograph 8: SFVAMC building (number unknown), 1948, showing original window details (photograph courtesy of San Francisco Public Library)
Photograph 9: Aerial photograph of SFVAMC, 1951 (photograph courtesy of San Francisco Public Library)

Photograph 10: Aerial photograph of SFVAMC, looking southeast, 1971 (photograph courtesy of San Francisco Public Library)
Recent investigations on the SFVAMC Fort Miley Campus that were not identified in the NWIC records search include work conducted for the Mental Health Patient Parking Addition (Winzler & Kelly 2010a) and the North Slope Seismic/Geologic Stabilization Project (Winzler & Kelly 2010b).

4.3 PREVIOUSLY IDENTIFIED HISTORIC PROPERTIES

4.3.1 Archaeological Resources

No archaeological resources have been identified directly within the SFVAMC Fort Miley Campus, and as such, the prehistory of the specific Campus location is not known. However, archaeological sites that reflect the character and nature of early Native American occupation of the Campus and surrounding region have been found in the immediate area.

Because most of the SFVAMC Fort Miley Campus is paved or covered in structures or landscaping, assessments have been based on record searches alone, and there have been no specific archaeological investigations. Although prehistoric archaeological sites may once have been present within and near the lands now occupied by the Campus, heavy urban development has likely destroyed or substantially damaged such evidence. In addition, the geotechnical report prepared by Treadwell & Rollo (2010) indicated that most of the Campus has a layer of fill material, 1 to 6 feet deep, overlaying bedrock. For these reasons, the Campus has an overall low sensitivity for the presence of intact prehistoric archaeological sites.

The SFVAMC is sensitive for historic-era archaeological resources because a portion of Fort Miley once stood on the SFVAMC Fort Miley Campus. The SFVAMC is also sensitive for the presence of human remains. Fort Miley once contained the City Cemetery Reservation, which covered present-day Fort Miley, the SFVAMC, and a large portion of Lincoln Park. The burials were removed in 1908, but construction activities at the Palace of the Legion of Honor discovered human remains in 1921 and 1993, indicating that perhaps not all of the human remains were removed.

Although the SFVAMC Fort Miley Campus may have an elevated sensitivity for the presence of historic-era archaeological remains and burials and could also contain prehistoric archaeological remains (although the Campus has low sensitivity for the presence of prehistoric archaeological resources), no historic-era or prehistoric archaeological resources have been identified within the APE.

4.3.2 Fort Miley Military Reservation Historic District

The Fort Miley military reservation was first conceived in 1850, when President Millard Fillmore set aside Point Lobos for military purposes, but the land was not officially acquired from the City and County of San Francisco until 1893. Construction began on the defense fortifications at Fort Miley in 1899, and continued through 1944, when the last gun battery was built.

Rectangular in plan, the Fort Miley Military Reservation historically consisted of three complexes of structures: three gun batteries, searchlight facilities, fire control stations, and earthworks at the west; a gun battery at the east; and the Fort Miley post in the middle, which contained barracks, storehouses, and officers’ quarters. In 1932, the Fort Miley military
reservation was divided into two parts when 25 acres (eventually 29 acres total) of land was transferred to VA for the SFVAMC. In 1934, all but one of the buildings and structures that composed the post of Fort Miley were demolished. Fort Miley now surrounds the SFVAMC Fort Miley Campus to the east and the west, and is unofficially divided into two parts: East Fort Miley and West Fort Miley.

The Fort Miley Military Reservation Historic District was listed in the NRHP in 1980, under Criterion A, for its significance at the national level as part of the military defense system of San Francisco. The period of significance is 1892 to 1950. Extant structures and buildings within the Fort Miley Military Reservation Historic District include battery emplacements, fire control stations, searchlight facilities, and an ordnance storehouse.

The gun batteries at Fort Miley, along with Fort Barry on the northern side of the Golden Gate Bridge, represent the last phase of the Endicott period of seacoast defense—a modernization and construction program for coastal fortification that began in 1890. Battery Chester in West Fort Miley and Battery Livingston in East Fort Miley, completed between 1901 and 1903, are significant as the first defense structures constructed within the boundaries of Fort Miley. Constructed in 1902, the Ordnance Storehouse—the only extant building from the Fort Miley post—was moved a short distance to its current location sometime between 1934 and 1942; despite being moved, the Ordnance Storehouse is significant as the sole survivor of the Fort Miley post buildings. Structures and buildings constructed at West Fort Miley during World War II, including the searchlight powerhouse and three fire control buildings, are significant for their association with the continued improvement of harbor defense through World War II. Battery 243, completed in 1944, was the last structure constructed at Fort Miley, and it represents the last phase of the “traditional concept” of coastal defense; Battery 243 was the only 6-inch gun battery of its kind in the GGNRA.

Buildings and structures that have been removed include the following:

- Battery Call, constructed in 1915 in West Fort Miley and salvaged in 1921.
- Searchlights 5 and 6, constructed in 1937 in West Fort Miley and removed at an unknown date.
- Four of the original seven fire control stations, all located in West Fort Miley and built by World War II (removal date unknown).
- Two 3-inch anti-aircraft gun emplacements located near Battery Livingston, constructed in the 1920s (removal date unknown).
- All but one of the buildings that composed the original Fort Miley post.

The NRHP nomination form for Fort Miley does not specifically address character-defining features of the buildings, structures, or landscape, but the nomination notes that Battery Chester’s “simple, but impressive architectural lines, its massiveness, and its unique aspect of having gun platforms designed for both ‘disappearing’ (2) and barbette (1) carriages” contribute to the
significance of the site. Additionally, Battery Livingstone is notable for its “simpl[e] and functional lines, and the massiveness of its earthworks.”

The NRHP nomination form describes the overall condition of the site in 1979 as “good,” and the integrity of most extant features in the Historic District as moderate to high. A report by Winzler & Kelly notes that Historic District integrity was high in 2010 (Winzler & Kelly 2010a).

### 4.3.3 SFVAMC Historic District

The NHPA Baseline Documentation package includes the 2009 NRHP nomination, 2011 photo survey, previous Section 106 consultation materials, and an expanded discussion of the character and integrity of the SFVAMC Historic District (AECOM 2011). The following discussion of the district was adapted from the Baseline Documentation, which can be consulted for additional detail.

Construction of the SFVAMC hospital and diagnostic center began in 1933, and the hospital was dedicated in November of 1934. In 1934, the SFVAMC consisted of 21 concrete buildings, designed in the Art Deco style with Mayan-inspired ornamentation. The original SFVAMC Fort Miley Campus was designed by VA architects and built by the Herbert M. Baruch Corporation. The buildings were clustered in the northern and eastern sections of the lushly landscaped Campus to lessen the impact on the adjacent neighborhood, as well as to provide space for patient convalescence and recreation.

A considerable amount of the original SFVAMC budget was devoted to creating lawn areas and semi-formal landscaping around the principal buildings. Other, less ornamental expanses of grass were planted adjacent to most of the other original SFVAMC Fort Miley Campus buildings that were constructed in 1934 or shortly thereafter. These served as buffers between the buildings and the internal circulation system of roads and walkways. The lawns also performed the function of softening the impact of the rather large concrete buildings on the surrounding landscape. Lawns still exist adjacent to Buildings 2, 3, 5, 7, 8, 9, 10, 11, 18.

The SFVAMC Historic District was determined eligible for listing in the NRHP under Criteria A and C in 1980 by the VA Historic Preservation Officer, which was corroborated by the Keeper of the National Register with a formal Determination of Eligibility Notification, signed in May of 1987. The Historic District was listed in the NRHP under Criteria A and C in April 2009. The 2009 listing states that the district “qualifies under Criteria [sic] C due to its integrity as a very early example of a federal building designed with seismic-resistant building technologies and for the design of its Mayan Art Deco ornamentation. It demonstrates integrity under Criteria [sic] A due to its significance as a site of one of the early standardized VA hospitals” (Bright and Bamburg 2009).

The Historic District contains 14 contributing buildings and structures (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 18, 20, and the flag pole and base) and nine non-contributing buildings or structures (14, 25, 26, 31, 32, 33, 202, 210, and 212) set on 12 acres of the overall 29-acre SFVAMC Fort Miley

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5 Ibid.
Campus (see Exhibit 6, “SFVAMC Historic District”). The nomination is not explicit about which physical or intangible qualities of the district compose the character-defining features of the district; however, extrapolating from the statement of significance, the three character-defining features of the Historic District are described in the following paragraphs.

- The Historic District’s ongoing operations as a VA medical facility would be a key character-defining feature that conveys its significance as an early VA hospital.

- The structural system of each of the contributing buildings constructed during the 1934 building campaign would be a seldom seen but critically important quality that allows the Historic District to represent an early example of seismic-resistant building technologies.

- The architectural qualities that convey the Historic District’s significance as an example of Mayan Art Deco design include the “play between horizontal and vertical [that] is balanced with bold, horizontal podiums and thick concrete walls playing off delicate terra cotta ornament and strong vertical lines” (NRHP Nomination Section 7, Page 1 of 13). Dramatic massing and proportions, centrally located entrances that are embellished with terra cotta design motifs, towers with stepped parapets projecting above rooflines, and molded and inscribed terra cotta ornamentation that is inspired by historic Mayan designs are all mentioned in the nomination’s description of the architectural significance of the Historic District.

The nomination also recognizes that “Several major building campaigns since 1934 have dramatically altered the semi-pastoral character of the SFVAMC Fort Miley Campus by adding over a dozen buildings whose design and locations do not support the design plan of the original Campus. The large size of many of these new buildings, combined with their awkward siting and incompatible materials and design, have harmed the overall integrity of the original Campus. In addition, many of the original 1934 buildings have been unsympathetically altered, particularly those that have received large additions” (Bright and Bamburg 2009).

Some historic landscaping features were removed by the time that the Historic District was listed, including the large garden and horseshoe-shaped driveway for patient drop off located south of Building 2, which had served as the primary landscaped feature on the SFVAMC Fort Miley Campus (see Exhibits 7 A–D, “Historic Development”).

A secondary landscaped area east of Building 1 was replaced by surface parking in 1964, and all that remains is the memorial flagpole structure. The triangular patch of lawn fronting Clement Street between 42nd and 43rd Avenues and the strips of lawn buffering Buildings 2, 3, 5, 7, 8, 9, 10, 11, and 18 (all of which are contributors to the Historic District) are all that remain from a once extensively landscaped campus.

There are also several sections of the current SFVAMC Fort Miley Campus that, while not landscaped, feature stands of trees and scrub. These areas are largely confined to the edges of the Campus, on steep slopes or other non-buildable sections. Following the SFVAMC hospital dedication in 1934, all sections of the Campus that were not developed or formally landscaped—including much of the western part of the Campus, the northern slope, and a patch near the water tower—were allowed to grow wild. Although this semi-wild vegetation was not formally planted.
and does not contribute to the understanding of the historic uses of Fort Miley or the SFVAMC, it forms a green buffer between the institution, the Outer Richmond neighborhood, GGNRA, and Fort Miley Military Reservation Historic District.

The SFVAMC Historic District is most easily understood when viewed from the open area located between the east side of Building 1, the south side of Building 2, the west sides of Buildings 8 and 9, and from the picnic area and portion of Veterans Drive that borders the north slope between Building 10 and Building 18. From these locations, the viewer primarily sees the historic buildings and how they interrelate, which in turn conveys the facility’s significance as a 1930s Veteran’s hospital. When viewed from the entry to the SFVAMC Fort Miley Campus, or from the remainder of Veterans Drive (the western and southern segments), the buildings introduced during the 1964 construction campaign are visually dominant, to the point where the historic facility is completely obscured.

5. APPLICATION OF THE CRITERIA OF ADVERSE EFFECT

5.1 CRITERIA FOR ASSESSING PROJECT EFFECTS

5.1.1 Regulatory Framework

National Historic Preservation Act of 1966

The NHPA established the Advisory Council on Historic Preservation (ACHP), authorized the Secretary of the Interior to maintain the NRHP, directed the Secretary of the Interior to approve state historic preservation programs that provide for a SHPO, established a National Historic Preservation Fund program, and codified the National Historic Landmarks program.

Section 106 of the NHPA requires that federal agencies take into account the effects of their actions (referred to as “undertakings” under Section 106) on properties that may be eligible for or listed in the NRHP, and afford the ACHP a reasonable opportunity to comment.

Section 106 of the National Historic Preservation Act of 1966

Section 106 of the NHPA and its implementing regulations (36 CFR 800, as amended in 1999) requires federal agencies to consider the effects of their undertakings, or those they fund or permit, on properties that may be eligible for listing, or are listed in the NRHP.

The regulations implementing Section 106 call for considerable consultation with the SHPO, Indian tribes, and interested members of the public throughout the process. The four principle steps are as follows:

1. Initiate the Section 106 process, including a plan for public involvement (36 CFR 800.3)

2. Identify historic properties, consisting of those resources within an APE that are eligible for inclusion in the NRHP (36 CFR 800.4)

3. Assess the effects of the undertaking to historic properties in the APE (36 CFR 800.5)

4. Resolve adverse effects (36 CFR 800.6)
Adverse effects on historic properties often are resolved through preparation of a memorandum of agreement (MOA) or a programmatic agreement developed in consultation between the lead federal agency, the SHPO, Indian tribes, and interested members of the public. The ACHP is also invited to participate.

The LRDP is an undertaking that is subject to Section 106 of the NHPA because implementation of this proposed undertaking would be a federal action with the potential to affect NRHP-eligible properties. VA is the lead federal agency responsible for compliance with Section 106 of the NHPA. Section 106 requirements are being met in accordance with the VA Cultural Resource Management Checklist, which outlines the regulatory requirements and documentation standards for project review (VA 2009).

Per the requirements of the NHPA, VA has initiated consultation under Section 106 of the NHPA with the SHPO to solicit comments on the proposed undertaking.

5.2 EFFECTS ASSESSMENT

5.2.1 Assessment Methods

The NHPA Section 106 criteria for assessing adverse effects provide the framework for assessing how projects affect the historic properties located within the APE. According to 36 CFR 800.5, undertakings would have an adverse effect on historic properties if the project impairs the characteristics that qualify a property for inclusion in the NRHP.

Thus, there is a direct relationship between understanding why a resource is eligible for listing in the NRHP, which physical characteristics are important in conveying that historical significance, and the assessment of project effects. This relationship is typically discussed in terms of historical integrity, which is a historic property’s ability to convey its significance to a viewer by virtue of retaining those aspects of location, design, materials, workmanship, feeling, setting, and association that are necessary for the viewer to understand the property’s historically significant role.

When considering a historic district, the integrity of the whole is considered paramount to the individual integrity of any one component (unless there are individually eligible buildings, structures, or objects present). Thus, in some cases, actions that would result in an impairment of the integrity of an individually eligible building may not be considered actions that would impair the integrity of a historic district, depending on the reasons that the district is eligible in the first place.

Although by no means comprehensive, the following is a list of actions that typically result in a finding of adverse effect on a historic property:

- Physical destruction of or damage to all or part of the property.
- Alteration of the property, including restoration, rehabilitation, repair, maintenance, stabilization, hazardous material remediation, and provision of handicapped access, that is not consistent with the Secretary of the Interior’s Standards for the Treatment of Historic Properties (36 CFR 68) and applicable guidelines.
• Removal of the property from its historic location.

• Changing the character of the property’s use or of physical features within the property’s setting that contribute to its historic significance.

• Introduction of visual, atmospheric, or audible elements that diminish the integrity of the property’s significant historic features.

• Neglect of the property that causes its deterioration, except where such neglect and deterioration are recognized qualities of a property of religious and cultural significance to an Indian tribe or Native Hawaiian organization.

• Transfer, lease, or sale of the property out of federal ownership or control without adequate and legally enforceable restrictions or conditions to ensure long-term preservation of the property’s historic significance.

5.2.2 Archaeology

Alternative 1: SFVAMC Fort Miley Campus Buildout Alternative

Near-Term Projects

Alternative 1 near-term projects would include the LRDP Phase 1 projects located at the SFVAMC Fort Miley Campus. The archaeological research conducted indicates that no prehistoric or historic-era archeological sites, features, artifacts, or human remains have been documented within the existing SFVAMC Fort Miley Campus and no archaeological resources are known within the Campus. Therefore, no archaeological historic properties would be affected. Although no documented archeological resources or human remains are known to be present within the existing Campus, buried or otherwise obscured and undocumented significant prehistoric and historic-era archeological resources or human burials may be present within the Campus, and thus, could be affected by construction activities.

Therefore, it is recommended that if an MOA is prepared to resolve adverse effects on non-archaeological properties, that stipulations should be included to specify procedures for the identification and treatment of archaeological resources and burials in the event that such resources are discovered during construction activities. An archaeological treatment plan that describes archaeological procedures, notification and consultation requirements, professional qualifications requirements, and procedures for the disposition of artifacts if any are discovered, should be appended to the MOA.

Long-Term Projects

Alternative 1 long-term projects would include the LRDP Phase 2 projects located at the SFVAMC Fort Miley Campus. Archaeological research conducted indicates that no prehistoric or historic-era archeological sites, features, artifacts, or human remains have been documented within the existing Campus, and no archaeological resources are known within the Campus. Therefore, no archaeological historic properties would be affected. Although no documented archeological resources or human remains are known to be present within the existing Campus, buried or otherwise obscured and undocumented significant prehistoric and historic-era
archaeological resources or human burials may be present within the Campus, and thus, could be affected by construction activities.

The stipulations in an MOA (if prepared) and an archaeological treatment plan recommended for the near-term projects should also be applied to the long-term projects.

**Alternative 2: SFVAMC Fort Miley Campus Plus Mission Bay Campus Alternative**

**Near-Term Projects**

Alternative 2 near-term projects would be the same as Alternative 1 near-term projects. Therefore, the Alternative 2 near-term project effects are the same as those described under Alternative 1 near-term project effects.

**Long-Term Projects**

Alternative 2 long-term projects would include the LRDP Phase 2 projects located at the SFVAMC Fort Miley Campus (with the exception of the proposed ACC) as well as a new SFVAMC Mission Bay Campus. The Alternative 2 long-term project effects at the SFVAMC Fort Miley Campus would be similar to those described under Alternative 1 long-term project effects at the SFVAMC Fort Miley Campus, with the exception of those related to the proposed ACC. It is currently unknown if any archaeological historic properties are located within the area of the proposed new SFVAMC Mission Bay Campus. Given the highly developed nature of the Mission Bay area, it likely has low sensitivity for subsurface prehistoric resources, but this has not been demonstrated. No archaeological records search, pedestrian survey, or test excavations have been conducted in the area of Mission Bay, where a new campus would possibly be constructed. The Mission Bay area’s sensitivity for historic-era archaeological resources is unknown. Project-related ground-disturbing activities could have an adverse effect on both prehistoric and historic-era archaeological properties; however, there is not enough evidence available to determine if specific properties would be affected. Therefore, no finding of effect is possible at this time.

### 5.2.3 Fort Miley Military Reservation Historic District

**Alternative 1: SFVAMC Fort Miley Campus Buildout Alternative**

Implementation of the proposed LRDP would not result in any physical changes to the Fort Miley Military Reservation Historic District. Although the LRDP proposes development along the border between East Fort Miley and the SFVAMC Fort Miley Campus, hospital facilities have been located along this border since 1934, and thus, the setting and association would not be substantively changed from current conditions. As such, implementation of the LRDP would result in no adverse effect on the Fort Miley Military Reservation Historic District.

**Near-Term Projects**

Alternative 1 near-term projects correspond to the LRDP Phase 1 projects. Construction activities would occur outside of and adjacent to the boundaries of the Fort Miley Military Reservation Historic District, including the construction of two new buildings during Phases 1.3 (Building 22 Hoptel) and 1.5 (Building 24 Mental Health Clinic Expansion). These projects would introduce atmospheric and visual changes; however, these changes would be somewhat obscured by the tree canopy (including thick Monterey cypress stands) along the western
boundary of the Fort Miley Military Reservation Historic District. The Fort Miley Military Reservation Historic District would retain its integrity of location, design, character, and setting, and would continue to convey its significance.

Section 6 discusses how individual LRDP phases would affect individual contributing features and other characteristics of the Historic District.

**Long-Term Projects**

Alternative 1 long-term projects would include the LRDP Phase 2 projects located at the SFVAMC Fort Miley Campus. Construction activities would occur outside of Fort Miley Military Reservation Historic District boundaries, including the construction of one new building during Phase 2.3 (Mental Health Research Expansion). This project would introduce atmospheric and visual changes; however, these changes would be somewhat obscured by the tree canopy (including thick Monterey cypress stands) along the western boundary of the Fort Miley Military Reservation Historic District. The proposed construction would be mostly shielded from view from Fort Miley by landscape and dense vegetation. The Fort Miley Military Reservation Historic District would retain its character-defining features and would continue to convey its significance. Therefore, there would be no adverse effect on the Fort Miley Military Reservation Historic District.

**Alternative 2: SFVAMC Fort Miley Campus Plus Mission Bay Campus Alternative**

**Near-Term Projects**

Alternative 2 near-term projects would be the same as Alternative 1 near-term projects. Therefore, the Alternative 2 near-term project effects are the same as those described under Alternative 1 near-term project effects. Alternative 2 near-term projects would have no adverse effect on the Fort Miley Military Reservation Historic District.

**Long-Term Projects**

The Alternative 2 long-term projects and associated effects at the SFVAMC Fort Miley Campus would be similar to the Alternative 1 long-term projects, except that the proposed ambulatory care center would not be constructed and construction activities would occur in the Mission Bay area, which is far removed from the Fort Miley Military Reservation Historic District. This alternative would have no adverse effect on the Fort Miley Military Reservation Historic District.

**5.2.4 SFVAMC Historic District**

The projects included in the LRDP are planned projects, and design details have not been developed. Section 106 review of planned projects necessarily focuses on how project activity types may affect historic properties based on an understanding of the type of project and the character of the historic property. As project details are developed, further Section 106 review will be necessary to determine whether adverse effects have been avoided through application of the [Secretary of the Interior’s Standards for the Treatment of Historic Properties](#) or similar preservation treatment guidance.

Overall, projects that do not change the characteristics that qualified the SFVAMC Historic District for listing in 2009 will be assessed as having minimal or no effect on the integrity of the
Historic District. More specifically, projects that diminish a viewer’s ability to understand the Historic District’s significance as defined in the NRHP nomination—as a medical facility for American Veterans, as a 1930s seismically resistant structural design, or as an example of Mayan Art Deco stylistic influences—would be deemed as having a negative effect on the integrity of the Historic District.

**Alternative 1: SFVAMC Fort Miley Campus Buildout Alternative**

Implementation of the LRDP would result in an adverse effect on the SFVAMC Fort Miley Campus Historic District due to the cumulative impairment of the integrity of materials, design, feeling, and setting of the District. Although no single LRDP project would result in an adverse effect on its own, the future state of the Historic District will have been impaired by the combination of physical changes to individual contributing buildings, introduction of new facilities within the Historic District, and changes to the setting of the Historic District resulting from the densification of the Campus (see Exhibit 8, “Massing Comparison”).

The LRDP includes seismic retrofit of Buildings 1, 5, 6, 7, 8, 9, 10, 11, and 13. With the exception of Building 13, the other eight buildings are SFVAMC Historic District contributors, and proposed activities would be within the SFVAMC Historic District. The seismic retrofit would physically alter the contributors and may require changes to the original design, materials, and workmanship of the buildings and affect their ability to convey their historical significance. Alteration or loss of character-defining elements of contributing buildings during seismic upgrade activities would contribute to the LRDP’s adverse effect on the Historic District.

The LRDP also includes new construction within the SFVAMC Historic District, and new construction immediately adjacent to the Historic District. New construction has the potential to introduce design elements, building materials, and massing that would be out of character with the qualities that qualify the Historic District for listing in the NRHP. Disrupting the character of the Historic District with new, incompatible construction would impair the Historic District and contribute to the LRDP’s adverse effect on the Historic District.

Two of the projects in the LRDP would require demolition of contributing buildings within the SFVAMC Historic District. The historical Campus has already endured the loss of many of the original buildings, making each of the remaining buildings critical to the Historic District’s ability to convey its historical significance. Loss of contributing buildings would contribute to the LRDP’s adverse effect on the Historic District.

Section 6 discusses how LRDP activities would result in impairment of individual contributing buildings and other characteristics of the Historic District.

**Near-Term Projects**

This section includes a description of the Alternative 1 near-term (Phase 1) project components that are proposed under the LRDP. A discussion of effects on individual contributors is provided in Section 6.
Phase 1.1 Building 41 Research
Phase 1.1 would construct a large two-story building adjacent to the SFVAMC Historic District, to the south and slightly west of Building 6. This would introduce a new visual element in close vicinity to the SFVAMC Historic District, but outside of the Historic District boundaries. This phase also includes the demolition of building T-17, a non-contributor to the Historic District.

Phase 1.2 Emergency Operations Center and Building 211 Parking Garage Expansion
Phase 1.2 would construct a five-story parking structure west of Building 18, a contributor. The Emergency Operations Center would be incorporated into the parking garage building. Construction would take place on the western end of the SFVAMC Fort Miley Campus, outside of and to the rear of the SFVAMC Historic District, which is oriented more to the north and facing the San Francisco Bay. The proposed development would occur outside of the Historic District and would introduce new visual elements to the district.

Phase 1.3 Building 22 Hoptel and Seismic Retrofit of Buildings 5, 7, 9, 10, 11, and 13
Phase 1.3 would construct a two-story building behind Buildings 9 and 10 (both contributors) as well as seismically retrofit Buildings 5, 7, 9, 10, 11, and 13. With the exception of Building 13, these buildings are contributors to the SFVAMC Historic District. Also with the exception of Building 13—which is outside of Historic District boundaries—all proposed activities would be conducted within the Historic District. (See Photographs 11–14 for views of Buildings 5, 7, 9, and 10.)

Phase 1.4 Patient Welcome Center and Drop-Off Area
Phase 1.4 would introduce a traffic circle southwest of the south elevation of Building 1, and permanently close through traffic on Veterans Drive. A one-story pavilion would also be constructed on the ground level between Buildings 200 and 203, extending out towards Building 1. A traffic circle and drop-off area that would be introduced in the front would require taking out part of the roadway and replacing it with a garden.

The planned construction would take place inside the SFVAMC Historic District boundaries and would introduce new visual elements to the Historic District. The location of the planned construction within the Historic District has already been altered in recent years through the construction of Buildings 200 and 203, and the parking lot near Building 1. (See Photograph 15 for a view of Building 1.)

Phase 1.5 Building 24 Mental Health Clinic Expansion
Phase 1.5 would construct a three-story building behind Building 8 (a contributor). Building 20 (a contributor) would be demolished as part of this phase. All proposed construction would occur within the SFVAMC Historic District boundaries. The planned development would alter the look and feel of the Historic District by removing a contributing resource and introducing modern elements into a part of the Historic District that is mostly intact and features a high level of integrity of setting and design. (See Photographs 16–17 for views of Buildings 8 and 20.)
Photograph 11: Building 5, looking southwest from the East Entrance between Buildings 5 and 7. Building 5 will undergo a seismic upgrade during Phase 1.3 (AECOM 2011).

Photograph 12: Building 7, looking northeast from surface parking lot between Buildings 1 and 9. Building 7 will undergo a seismic upgrade during Phase 1.3 (AECOM 2011).
Photograph 13: Building 9, looking east from parking lot. Building 9 will undergo a seismic upgrade during Phase 1.3. Introduction of Building 22 to the east may impair the integrity of Building 9 (AECOM 2011).

Photograph 14: Building 10, looking north from sidewalk to the west of Building 9. Building 10 will undergo a seismic upgrade during Phase 1.3. Introduction of Building 22 to the southeast may impair the integrity of Building 10 (AECOM 2011).
Photograph 15: Building 1, looking east from the future location of the Welcome Center. During Phase 1.4, a traffic circle will be introduced southwest of Building 1. Building 1 will undergo a seismic upgrade during Phase 2.4 (AECOM 2010).

Photograph 16: Building 8, looking southeast from the parking lot. Building 8 will undergo a seismic upgrade during Phase 2.4. Introduction of Buildings 23 and 24 to the east may impair the integrity of Building 8 (AECOM 2011).
Photograph 17: Building 20, looking northeast from driveway behind (east of) Building 8. Building 20 will be demolished during Phase 1.5 (AECOM 2010).

Photograph 18: Building 18, looking southwest. Building 18 will be demolished during Phase 2.4 (AECOM 2010).
**Landscaping and Open Space Areas**

As part of this alternative, several trees would be removed and replaced with trees that are more adaptable to the climate. None of the individual trees within the Historic District are contributors.

The LRDP includes a Landscape Concept to provide guidance for future landscape improvements throughout the existing SFVAMC Fort Miley Campus, within and outside of the SFVAMC Historic District boundaries. The goals of the Landscape Concept are to:

- Reinstate a landscape character of dignity, quality, and professionalism that honors America’s Veterans and communicates the excellent standards of the Campus.
- Create a landscape that supports health and healing.
- Promote good relations with Campus neighbors.
- Create a welcoming environment.
- Integrate sustainability.

According to the NRHP nomination, the SFVAMC Fort Miley Campus originally included extensive and semi-formal landscaping throughout the site. Major landscaping included a large garden and horseshoe-shaped patient drop-off driveway near the entry to Building 2, and landscaping east of Building 1 (Bright 2008). Most of the original Campus landscaping has been removed, and currently, only remnants of the original hardscape and vegetation remain in place, including patches of lawn and some individual trees that are not character-defining features. The removal of this formal landscaping has resulted in an overall loss of integrity to the SFVAMC Historic District’s landscaping, and any sense of cohesion involving the original Campus landscaping has been lost.

The goals of the Landscape Concept are consistent with the design intent of the historical landscaping plan for the Campus, which included a formal layout that welcomed patients and visitors and that encouraged healing through enjoyment of the gardens and grounds. Future landscape treatments that adhere to these goals are likely to benefit the overall integrity of the Historic District by reintroducing a more cohesive and formal landscape plan that supports health and healing and establishes a welcoming environment.

**Long-Term Projects**

This section includes a discussion of the Alternative 1 long-term projects (Phase 2) that are proposed under the LRDP. A discussion of effects on individual contributors is provided in Section 6.

**Phase 2.1 Operating Room Expansion (D-Wing)**

This phase would include an addition of a D-wing on Building 200, which is located outside of the Historic District. The planned construction would occur outside and to the south of the SFVAMC Historic District boundaries. The proposed development would occur outside of the Historic District and would introduce new visual elements adjacent to the district; however, the
construction would not substantially alter the existing scale and character of the SFVAMC Fort Miley Campus.

**Phase 2.2 IT Support Space Expansion (Building 207)**

This phase would construct an addition on Building 207, located outside of the Historic District. The planned construction would occur outside and to the south of the SFVAMC Historic District boundaries.

**Phase 2.3 Building 23 Mental Health Research Expansion**

Phase 2.3 would construct a three-story building behind Building 8 (a contributor). The planned development would alter the look and feel of the SFVAMC Historic District by introducing modern elements into a part of the Historic District that is mostly intact and features a high level of integrity of setting and design. (See Photograph 16 for a view of Building 8.)

**Phase 2.4 Building 40 Research**

Phase 2.4 would construct a 5-story building and would involve the demolition of Buildings 12, 14, 18, 21, and T-23. With the exception of Building 18, these are all non-contributors to the SFVAMC Historic District. It would also include the seismic retrofit of Buildings 1, 6, and 8, which are contributors to the Historic District. The planned construction would take place on the west side of the existing SFVAMC Fort Miley Campus, both within and immediately outside of the SFVAMC Historic District boundaries. (See Photograph 18 for a view of Building 18.)

**Phase 2.5 Ambulatory Care Center**

This phase would include the construction of a five-story building, with a basement, in the northwestern part of the SFVAMC Fort Miley Campus. This would introduce a new visual element in close vicinity to the SFVAMC Historic District, but outside of the Historic District boundaries.

**Swing Space (Temporary)**

Phase 2 would entail bringing temporary, modular units into the northwest parking lot of the SFVAMC Fort Miley Campus, outside of and to the rear of the SFVAMC Historic District. No permanent changes would be made to the Historic District or to its setting.

**Alternative 2: SFVAMC Fort Miley Campus Plus Mission Bay Campus Alternative**

**Near-Term Projects**

Alternative 2 near-term projects would be the same as Alternative 1 near-term projects. Therefore, the Alternative 2 near-term project effects are the same as those described under Alternative 1 near-term project effects.

**Long-Term Projects**

The Alternative 2 long-term projects and associated effects at the SFVAMC Fort Miley Campus would be similar to the Alternative 1 long-term projects, except that the proposed ACC would not be constructed.
The Alternative 2 long-term projects would also involve the development of a new SFVAMC Mission Bay Campus at an as-yet unknown specific location. The eligibility status of buildings in the Mission Bay area is not currently known. Historic resources surveys for a new Mission Bay Campus site would be completed in conjunction with any future, project-level environmental review at the time a specific site or sites are identified.

Depending on where the project is located and the results of the historic resources surveys conducted for project-level review, proposed development associated with a new SFVAMC Mission Bay Campus could occur in close proximity to historic resources that are 50 years old or older. Given the age of these resources, it is possible they are historically significant and eligible for listing in the NRHP. Proposed development could lead to physical demolition, destruction, relocation, or alteration of potentially significant historic resources. Because the significance of historic resources and their eligibility for listing in the NRHP is not currently known, it is possible that this alternative may impair historic properties and result in an adverse effect.

To minimize adverse effects on significant historic properties, avoidance would be first attempted. However, appropriate mitigation measures for this alternative would need to be developed upon further consultation with SHPO and in conjunction with any future, project-level environmental review.

6. CONCLUSIONS

VA has determined that the proposed undertaking (LRDP) will have an adverse effect on the following historic properties:

- SFVAMC Historic District

See Table 2, “Historic Properties Affected,” for a detailed list of properties and associated effects.

Pursuant to 36 CFR 800.6(a) and 800.6(b)(1), VA will consult with SHPO and Section 106 signatory consulting parties to resolve adverse effects.

The LRDP FOE serves only to obtain SHPO concurrence that the proposed undertaking (LRDP) will have an adverse effect on historic properties. Mitigation measures will be discussed in a separate consultation document along with a draft agreement document. The agreement document will stipulate the terms under which the proposed undertaking will be implemented in order to take into account its effects on historic properties.
### Table 2: Historic Properties Affected

<table>
<thead>
<tr>
<th>Property</th>
<th>LRDP Planned Activities</th>
<th>Effect Analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Archeological Sites</td>
<td>No historic properties affected</td>
<td>No historic properties affected</td>
</tr>
<tr>
<td>No known archaeological sites</td>
<td></td>
<td>The potential to encounter buried resources will be addressed through consultation with the SHPO.</td>
</tr>
<tr>
<td>present in the APE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fort Miley Military Reservation</td>
<td></td>
<td>No adverse effect on the Historic District because its integrity of location, design, materials, workmanship, feeling, and association would not be</td>
</tr>
<tr>
<td>Historic District</td>
<td></td>
<td>impaired, and the changes in setting would be consistent with the current setting (adjacent hospital facilities).</td>
</tr>
<tr>
<td>West Fort Miley - Battery Chester</td>
<td>New construction would not be visible.</td>
<td></td>
</tr>
<tr>
<td>(FI-1, FI-2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>West Fort Miley - Battery 243</td>
<td>New construction would not be visible.</td>
<td></td>
</tr>
<tr>
<td>(FI-4)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>West Fort Miley - Searchlight</td>
<td>New construction would not be visible.</td>
<td></td>
</tr>
<tr>
<td>Powerhouse (FI-3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>West Fort Miley - Fire Control</td>
<td>New construction would not be visible.</td>
<td></td>
</tr>
<tr>
<td>Station (FI-350)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>West Fort Miley - Fire Control</td>
<td>New construction would not be visible.</td>
<td></td>
</tr>
<tr>
<td>Station (FI-351)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>West Fort Miley - Fire Control</td>
<td>New construction would not be visible.</td>
<td></td>
</tr>
<tr>
<td>Station (FI-352)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>West Fort Miley - Unidentified</td>
<td>New construction would not be visible.</td>
<td></td>
</tr>
<tr>
<td>earthworks</td>
<td></td>
<td></td>
</tr>
<tr>
<td>East Fort Miley - Battery Livingston</td>
<td>Phase 1.3 (Building 22) phase 1.5 (Building 24 Mental Health Clinic Expansion)</td>
<td>New construction would not be visible.</td>
</tr>
<tr>
<td>(FI-329)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>East Fort Miley - Battery Springer</td>
<td>Phase 1.3 (Building 22) phase 1.5 (Building 24 Mental Health Clinic Expansion)</td>
<td>New construction would not be visible.</td>
</tr>
<tr>
<td>(FI-330)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>East Fort Miley - Ordnance Storehouse</td>
<td>Phase 1.3 (Building 22) phase 1.5 (Building 24 Mental Health Clinic Expansion)</td>
<td>Introduction of visual element consistent with current setting (hospital buildings) and screened by boundary line foliage.</td>
</tr>
<tr>
<td>Property</td>
<td>LRDP Planned Activities</td>
<td>Effect Analysis</td>
</tr>
<tr>
<td>----------------------------------</td>
<td>-----------------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>SFVAMC Historic District</td>
<td></td>
<td>Adverse effects would occur due to the introduction of new visual elements, demolition of contributing elements of the District, and physical alteration of contributing elements (unless projects are designed in accordance with the Secretary of the Interior’s Standards for the Treatment of Historic Properties).</td>
</tr>
<tr>
<td>Building 1 (Administration, Research)</td>
<td>Phase 1.4 (Patient Welcome Center and Drop-Off Area) Phase 2.4 (Seismic Retrofit of Buildings 1, 6, 8)</td>
<td>Physical alteration of the building (seismic upgrade). The feeling and setting of Building 1 would be changed by the introduction of the patient drop-off and closure of Veterans Drive to through traffic. However, this is likely to result in an improvement to the historical integrity of setting and feeling by reintroducing a formal landscape element evocative of those that were lost with the 1965 building campaign.</td>
</tr>
<tr>
<td>Building 2 (Administration, Clinics, Research)</td>
<td>Phase 2.1 (Operating Room expansion D-wing) Phase 2.2 (IT Support Space expansion-Building 207)</td>
<td>Vertical expansion of the buildings currently located south of Building 2 would cause a minimal change to the integrity of setting and feeling in comparison with the introduction of massive Building 200 in the original landscaped entry to Building 2.</td>
</tr>
<tr>
<td>Building 3 (Engineering)</td>
<td>None</td>
<td>The LRDP does not include physical alterations of Building 3, or any project activities in the vicinity that would affect the setting, feeling, or association of Building 3.</td>
</tr>
<tr>
<td>Building 4 (Research)</td>
<td>Phase 1.1 (Building 41 Research) Phase 2.4 (Demolition of Buildings 12, 18, 21, T-23 and removal of Building 14) Phase 2.5 (Ambulatory Care Center)</td>
<td>The introduction of Building 41 and the replacement of Building 12 with the Ambulatory Care Center will alter the setting of Building 4 by introducing a concentration of building masses where currently, there is visual and pedestrian openness. This change in setting would not impair the architectural qualities of the Historic District, but would contribute to the overall impairment of the District’s integrity of feeling and setting.</td>
</tr>
<tr>
<td>Building 5 (Clinic, Research)</td>
<td>Phase 1.3 (Seismic Retrofit of Buildings 5, 7, 9, 10, 11, and 13)</td>
<td>Physical alteration of the building (seismic upgrade).</td>
</tr>
<tr>
<td>Property</td>
<td>LRDP Planned Activities</td>
<td>Effect Analysis</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>------------------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| Building 6 (Research, Library)| Phase 1.1 (Building 41 Research)  
Phase 1.1 (Removal of Building T-17)  
Phase 2.4 (Seismic Retrofit of Buildings 1, 6, 8)  
Phase 2.4 (Building 40 Research)  
Phase 2.4 (Removal of Buildings 14, 18, 21, T-23, and 12)  
Phase 2.5 (Ambulatory Care Center) | Physical alteration of the building (seismic upgrade).  
The integrity of feeling and setting would be improved through the removal of Buildings 14, T-17, 21, and 23. However, the integrity of feeling and setting would be impaired by the introduction of Buildings 40 and 41, which would introduce a concentration of building masses to an area that is less densely developed. Currently, Building 6 is the most prominent building at the western end of the Historic District. Buildings 40 and 41 would change the scale, massing, and site plan rhythm of the western end of the Historic District. |
| Building 7 (Various)          | Phase 1.3 (Seismic Retrofit of Buildings 5, 7, 9, 10, 11, and 13)                         | Physical alteration of the building (seismic upgrade).                                                                                                                                                       |
| Building 8 (Mental Health Clinic) | Phase 1.5 (Building 24 Mental Health Clinic Expansion)  
Phase 1.5 (Removal of Building 20)  
Phase 2.3 (Building 23 Mental Health Research Expansion)  
Phase 2.4 (Seismic Retrofit of Buildings 1, 6, 8) | Physical alteration of the building (seismic upgrade).  
Demolition of Building 20, a contributor to the Historic District, would alter the setting and association of the building. Introduction of two buildings behind Building 8 may impair the design, workmanship, feeling, and setting of Building 8 if the new designs visually overpower the historic building or if connections between the buildings are not designed sensitively. |
| Building 9 (Hoptel)           | Phase 1.3 (Seismic Retrofit of Buildings 5, 7, 9, 10, 11, and 13)  
Phase 1.3 (Building 22 Hoptel) | Physical alteration of the building (seismic upgrade).  
Building 22 would be built immediately adjacent to Buildings 9 and 10 and had the potential to affect the design, workmanship, feeling and setting of those two buildings or the Historic District. However, Building 22 has been designed in accordance with the Secretary of the Interior’s treatment standards. Previous project-level Section 106 consultation concluded that Building 22 would have no adverse effect on the Historic District. |
<table>
<thead>
<tr>
<th>Property</th>
<th>LRDP Planned Activities</th>
<th>Effect Analysis</th>
</tr>
</thead>
</table>
| Building 10 (Hoptel)      | Phase 1.3 (Seismic Retrofit of Buildings 5, 7, 9, 10, 11, and 13)  
Phase 1.3 (Building 22 Hoptel) | Physical alteration of the building (seismic upgrade). Building 22 would be built immediately adjacent to Buildings 9 and 10 and had the potential to affect the design, workmanship, feeling and setting of those two buildings or the Historic District. However, Building 22 has been designed in accordance with the Secretary of the Interior’s treatment standards. Previous project-level Section 106 consultation concluded that Building 22 would have no adverse effect on the Historic District. |
| Building 11 (Research/Offices) | Phase 1.3 (Seismic Retrofit of Buildings 5, 7, 9, 10, 11, and 13)  
Phase 1.3 (Building 22 Hoptel) | Physical alteration of the building (seismic upgrade).                                                                                                                                                                                                                                                                                                                                                       |
| Building 18 (Office)      | Phase 2.4 (Removal of Buildings 14, 18, 21, T-23, 12)          | Demolition of the building, which is a contributor to the Historic District.                                                                                                                                                                                                                                                                                                                                 |
| Building 20 (Storage)     | Phase 1.5 (Removal of Building 20)                           | Demolition of the building, which is a contributor to the Historic District.                                                                                                                                                                                                                                                                                                                                 |
| Flag Pole and Base        | None                                                          | This object would remain in its original location and continue to be maintained and used.                                                                                                                                                                                                                                                                                                                      |
7. REFERENCES


Bright, Douglas. 2008. *National Register of Historic Places Resubmitted Nomination for San Francisco Veterans Affairs Medical Center*. Submitted to San Francisco Veterans Affairs Medical Center by Urban Programmers, San Jose, CA.

Bright, D., and B. Bamburg. 2009. *National Register of Historic Places Registration Form for San Francisco Veterans Affairs Medical Center*. Submitted to San Francisco Veterans Affairs Medical Center by Urban Programmers, San Jose, CA. Executed by the Keeper of the National Register, National Park Service, on April 20, 2009.


Treadwell & Rollo. 2010 (September). *Geotechnical Investigation, VMU Replacement and Expansion Project, San Francisco VA Medical Center (SFVAMC), San Francisco, California.*


APPENDIX A: CONSULTING PARTIES CORRESPONDENCE

Correspondence with SHPO, Native Americans, and any other consulting parties or the public (e.g., local governments)
March 20, 2012

Milford Wayne Donaldson, FAIA
State Historic Preservation Officer
Office of Historic Preservation
Department of Parks & Recreation
1725 23rd Street, Suite 100
Sacramento, CA 95816

RE: Section 106 Initiation for the San Francisco Veterans Affairs Medical Center Long Range Development Plan

Dear Mr. Donaldson:

The U.S. Department of Veterans Affairs (VA) is preparing a Long Range Development Plan (LRDP) for the San Francisco Veterans Affairs Medical Center (SFVAMC) at Fort Miley in San Francisco, California. The SFVAMC is located on a 29-acre site in northwest San Francisco (see Exhibits 1 and 2) and is a major tertiary care facility that serves as a VA regional referral center for specialized medical and surgical programs. The SFVAMC serves Veterans of the San Francisco Bay Area and northern California’s coastal counties. The 12-acre SFVAMC National Register Historic District lies within the boundaries of the SFVAMC Fort Miley Campus.

Per the requirements of the National Historic Preservation Act (NHPA), VA is contacting you to initiate consultation under Section 106 of the NHPA and to solicit your comments on the development of the LRDP. VA intends to seek concurrence with the Finding of Effect (FOE) on the LRDP following public input during the NEPA process.

Previous Coordination

VA contacted the California Office of Historic Preservation (OHP) on April 22, 2011 to initiate Section 106 consultation for the SFVAMC Institutional Master Plan (IMP). The OHP responded with a letter on June 16, 2011 requesting the following information: a map depicting recent, current and future project areas and descriptions of each project; copies of the most recent master plan and National Register nomination for the SFVAMC Historic District; updated photographs of all contributing buildings; and an assessment addressing effects of recent, current, and future projects on the Historic District’s contributors and overall integrity.

VA delivered copies of the IMP and the National Register nomination to the State Historic Preservation Officer (SHPO) in September 2011. In December 2011, VA hand delivered copies of baseline documentation for the SFVAMC, which included the rest of the information requested by the SHPO in June 2011. Also in December, VA met with OHP personnel at the SFVAMC to review the baseline documentation and tour the site. Following the meeting on site, VA submitted a summary of the December meeting to the SHPO and announced its intent to initiate Section 106 consultation for the LRDP. This letter fulfills the last of the requested items, which was to initiate formal consultation under Section 106 for the master plan, which is moving forward as the LRDP in place of the previous IMP.
Proposed Undertaking

The mission of the Veterans Health Administration (VHA) branch of VA is to "Honor America’s Veterans by providing exceptional health care that improves their health and well-being." In fulfillment of this mission, VHA provides comprehensive, integrated healthcare services to Veterans and other eligible persons pursuant to the provisions of the Veteran's Health Care Eligibility Reform Act of 1996 (Public Law 104-262) and other related statutory authority and regulations. VA health care facilities provide a broad spectrum of medical, surgical, and rehabilitative care. The SFVAMC Campus carries out the mission of VHA by providing care of military Veterans in the San Francisco Bay Area and Northern California by providing necessary medical center and research space.

Since 1930, the VA healthcare system has grown from 54 hospitals to include 152 medical centers, more than 1,400 outpatient clinics; 135 Community Living Centers (nursing home care units); and 48 domiciliaries. The number of Veterans requiring VA health benefits has grown during the last decade. The upward trend in Veterans (both wounded and non-wounded) results in a corresponding increase in the demand for medical facilities, including research space, on VA medical center campuses.

VA constructed and continues to operate the SFVAMC, located at Fort Miley in San Francisco, California (see Exhibit 1). Fort Miley was established as a Coastal Defense Battery in the 1893. Approximately 29 acres of land were transferred from U.S. Army to VA in 1932 for construction of a new veterans hospital and diagnostic center to provide health care options to the San Francisco Bay Area Veteran population. This area became the SFVAMC in 1934.

SFVAMC is the only VA Medical Center in San Francisco County and also serves Veterans of the North Coast of California. The SFVAMC is currently a 1.2 million-square-foot facility that includes a 124-bed tertiary care hospital, Primary and Specialty Care services, and a 120-bed Community Living Center. The SFVAMC is considered an aged facility with the need for retrofitting and expansion. The most recent third party Facility Condition Assessment details needed physical and structural improvements. The SFVAMC is also severely deficient in space, according to standard VA Space Criteria. According to the VHA Space Calculator, the SFVAMC the current estimated need is for an additional 600,000 square feet of medical facility space in order to adequately serve San Francisco Bay Area and North Coast Veterans through the year 2030.

The San Francisco VA Medical Center serves a Veteran population of more than 179,000 Veterans in Marin, Napa, Sonoma, Lake, Mendocino, Humboldt, San Francisco and San Mateo Counties. In fiscal year 2011, the Medical Center treated over 37,000 unique patients with over 326,000 outpatient visits and 5,600 inpatient stays. The San Francisco VA Medical Center has a long history of conducting cutting edge research, establishing innovative medical programs, and providing compassionate care to Veterans. SFVAMC has National Centers of Excellence in the areas of Epilepsy Treatment; Cardiac Surgery; Post Traumatic Stress Disorder; HIV; and Renal Dialysis. It has many other nationally recognized programs including: the Parkinson's Disease Research, Education, and Clinical Center; the Hepatitis C Research and Education Center; the Mental Illness Research & Education Clinical Center; and the Western Pacemaker and AICD Surveillance Program. The Medical Center was selected to head the Southwest Regional Epilepsy Center of Excellence. This Center provides epilepsy care, supports the training and educational needs of the network, and manages a VA epilepsy registry. It has been designated as one of only five VA Centers of Excellence in Primary Care Education and selected as a Community Resource and Referral Center, one of only 12 locations designed to serve homeless and at-risk for homeless Veterans and their families.

The Medical Center has been affiliated with the University of California, San Francisco (UCSF), School of Medicine for over 50 years. All physicians are dually accredited by SFVAMC and UCSF School of Medicine. SFVAMC currently has 189.2 residency and fellow positions and 40 allied health care

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1 A domiciliary provides residential rehabilitation treatment programs for a wide range of problems including: medical, psychiatric, vocational, educational, and social.
professionals. Annually, more than 700 UCSF School of Medical School Students from 36 programs receive training at the Medical Center.

SFVAMC has the largest funded research program in the Veterans Health Administration with $79 million in research expenditures in fiscal year 2011. Areas of particular interest are: prostate cancer, aging, oncology, cardiovascular disease, Hepatitis C, breast cancer, PTSD, substance abuse, neurological diseases, health services research, and advanced medical imaging. The Medical Center is one of the few medical centers in the world equipped for studies using both whole-body magnetic resonance imaging (MRI) and spectroscopy, and is the site of VA's National Center for the Imaging of Neurodegenerative Diseases.

**Summary of Proposed Undertaking**

The proposed undertaking is an LRDP that supports the mission of SFVAMC and provides for the health care needs of Bay Area and North Coast Veterans. The LRDP includes new development as well as retrofitting existing buildings and structures that house patient care, research, administrative, and hootel functions, as well as parking. Implementation of the LRDP would occur in phases over a 20-year timeframe through the year 2030. For a more detailed description of the LRDP alternatives, including information regarding square footage and phasing, see enclosures.

Based on the extensive input from the public and interested agencies, we have determined that an LRDP is the more appropriate planning tool for our purposes. As such, we will supplant the previous Institutional Master Plan, and we are in the process of preparing the LRDP. The first public review of the LRDP is scheduled to take place at the same time as the public Draft EIS. Input from your office provided through the Section 106 consultation process will also be incorporated into the LRDP.

**Purpose of and Need for the Undertaking**

The purpose of the LRDP is to establish the road map for the facility development projects necessary to meet the mission of VHA. VHA has identified a need for retrofitting existing buildings to the most recent seismic safety requirements and for an additional currently estimated 600,000 square feet of medical facility space to meet the needs of all San Francisco Bay Area and North Coast Veterans over the next 20 years.

SFVAMC, the only VA medical center in San Francisco County, has major space and parking deficiencies at the Fort Miley Campus. The mission of the SFVAMC is to be a major primary and tertiary health care center providing cost-effective and high-quality care to eligible Veterans in the San Francisco Bay Area and North Coast. The SFVAMC strives to deliver needed care to Veterans while contributing to health care knowledge through research. In addition, the SFVAMC is designated as the Bay Area’s Federal Coordinating Center (FCC) and a ready resource for Department of Defense (DOD) backup in the event of a national emergency. New major construction initiatives would transform the SFVAMC, providing seismic improvements and additional facility space over the next 20 years. The LRDP is needed in order for VA to adequately serve the greater San Francisco Bay Area and North Coast.

The overarching goals of the LRDP include:

- Enhance the SFVAMC Campus' function as a vital medical center for the Veterans in need;
- Construct a state-of-the-art medical facility to serve Veterans well into the future; and
- Provide appropriate space for research, clinical, administrative, and educational programs.

The specific objectives of the LRDP are to:

- Address the estimated 600,000 square foot space deficiency at the SFVAMC;

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2 A hootel is an overnight, shared lodging facility for eligible Veterans receiving health care services. This temporary lodging is available to Veterans that need to travel 50 or more miles from their home to the SFVAMC Fort Miley Campus.
• Retrofit existing buildings to the most recent seismic safety requirements to meet current VA Seismic Design Requirements (VA Directive H-18-8), in compliance with Executive Order 12941;
• Provide appropriate space to conduct research;
• Expand clinical inpatient and outpatient primary & specialty care for San Francisco Bay Area and North Coast Veterans;
• Improve the efficiency of clinical and administrative space through renovation and reconstruction;
• Meet patient privacy standards and Americans with Disability Act (ADA) requirements;
• Expand parking to meet current and future demand;
• Improve internal and external Campus circulation, utilities, and infrastructure; and
• Maintain/improve public transit access to the SFVAMC Campus.

Project Alternatives

In parallel with coordination of Section 106 review, the VA is conducting review under the National Environmental Policy Act (NEPA) with preparation of an Environmental Impact Statement (EIS). NEPA regulations require that an EIS contain a description of a proposed action and the alternatives considered. Agencies are directed to use the NEPA process "to identify and assess the reasonable alternatives to proposed actions that will avoid or minimize adverse effects of these actions upon the quality of the environment" (40 Code of Federal Regulations [CFR] 1500.2[6]). Alternatives found to be unreasonable do not need to be evaluated in an EIS.

The proposed action assessed in the EIS for SFVAMC is the renovation, expansion, and operation of the SFVAMC Fort Miley Campus to serve Veterans in the San Francisco Bay Area and the North Coast. After consideration of a variety of alternatives through the planning process and eliminating alternatives determined to be infeasible, three alternatives were derived that would allow for continued operation of SFVAMC over the next 20 years:

• Alternative 1: SFVAMC Fort Miley Campus Buildout Alternative
• Alternative 2: SFVAMC Fort Miley Campus Plus Mission Bay Campus Alternative (see Exhibit 3)
• Alternative 3: No Action Alternative

At this time there is no preferred alternative. The VA will select a preferred alternative and finalize the LRDP once it has gained input from the public and coordinating agencies through the NEPA and Section 106 processes. The December 2011 Baseline Documentation provided an overview of recent, current, and future projects; those tables are enclosed with this letter for reference.

Area of Potential Effects

The LRDP will include planned improvements within and adjacent to the SFVAMC Historic District and adjacent to the Fort Miley Historic District, a listed NRHP district that is administered by the Golden Gate National Recreational Area (GGNRA). The proposed archaeological and architectural areas of potential effects (APEs) have been drawn to include the entire SFVAMC Fort Miley Campus, which encompasses the construction footprint and all construction areas and any buildings or structures adjacent to those areas where potential LRDP-related effects may occur (see Exhibit 4).

Due to the close proximity of the Fort Miley Historic District boundary, there is some potential to indirectly affect setting, feeling, or association of the Historic District through implementation of the LRDP at the SFVAMC. This potential is significantly reduced on the north and northwest sides of the SFVAMC Fort Miley Campus, due to a dramatic drop in topography that renders the Campus difficult to see from that
portion of the adjacent Fort Miley Military Reservation Historic District. Thus, the architectural APE extends into a portion of Fort Miley to the northeast and east of the SFVAMC Fort Miley Campus. The architectural APE also extends southwest of the Campus to include residential buildings immediately adjacent to the SFVAMC boundary to account for potential effects to setting, feeling, and association of these buildings.

Plan for Public Involvement

In accordance with our responsibilities under both Section 106 and NEPA, the VA has identified a process for soliciting public comments on the environmental review documents that will, in turn, facilitate the incorporation of comments into the LRDP and the LRDP EIS. This process includes coordination with agencies and organizations with a demonstrated interest in heritage resources or in the SFVAMC Fort Miley Campus. It also includes providing members of the public with similar interests an opportunity to comment on the identification of historic properties and finding of effect, and taking those comments into consideration during consultation with the SHPO under Section 106.

During the early stages of this project, the VA identified organizations that have a demonstrated interest in the treatment of historic properties in San Francisco. These early efforts included NEPA scoping meetings held in October 2010 and again in April 2011, and individual meetings held with the GGNRA and the City/County of San Francisco in late 2011. Based on these meetings, as well as input previously provided by your office and by our consultants, the following parties will be notified of their opportunity to participate in the Section 106 process. At a minimum, the following organizations will be notified:

- City and County of San Francisco (Certified Local Government)
- San Francisco Veterans Affairs Commission
- National Park Service, Western Regional Office
- Golden Gate National Recreational Area
- Planning Association for the Richmond
- Friends of Lands End
- California Preservation Foundation
- National Trust for Historic Preservation, Western Regional Office
- NCI RE (The Veterans Health Research Institute) Board of Directors
- UCSF Medical School
- California Palace of the Legion of Honor
- Presidio Trust
- San Francisco County Veterans Service Officers

The VA will solicit input from the general public through our standard NEPA public involvement process. Opportunities for public comment have already been provided through the posting a Notice of Intent to Prepare an EIS and the EIS public scoping meetings. We plan to circulate the public Draft EIS for a 60-day review period (longer than the standard 45 day period) and hold a draft EIS public meeting during that review period. During that period, the Section 106 Baseline Documentation package and draft Finding of Effect will be available via our website, and we will have copies available for review at the draft EIS public meeting. At the public meeting, members of the public will be invited to comment on the Section 106 documentation, and their comments will be compiled and provided to SHPO for consideration during your review the Finding of Effect report.

These activities may lead to the identification of consulting parties who would become signatories to the agreement document that may be developed during the resolution of adverse effects (if warranted). There are no known federally recognized tribes affiliated with the Fort Miley area, and so there are no Tribal Historic Preservation Officers to consult. The Native American Heritage Commission will be contacted to request a list of tribal representatives who may have an interest in this location; these representatives will be included in the notification of the NEPA draft EIS public meeting. At this time, we assume that the GGNRA would be a consulting/signatory party by virtue of their proximity to the Campus and their status as a federal agency.
Identification of Historic Properties

The SFVAMC Fort Miley Campus was originally part of U.S. Army, Fort Miley. Fort Miley was a coastal artillery battery that the U.S. Army constructed in the late 19th century to protect the City of San Francisco from potential naval attacks. In 1932, the VA acquired 29 acres of Fort Miley and began construction of the SFVAMC. When completed, the SFVAMC consisted of several Art Deco buildings primarily located in the northern and eastern part of the SFVAMC site. Few changes occurred at the site until the 1960s, when the VA undertook efforts to modernize the SFVAMC through the addition of several new buildings and parking lots and the modification of existing buildings.

Previous Studies
Several previous studies have been prepared for the SFVAMC Fort Miley Campus, including an initial determination of eligibility in 1981 and National Register of Historic Places (NRHP) nominations in 2005 and 2008. The SFVAMC Historic District was listed in the National Register in April 2009 as significant under NRHP Criterion A as a site of an early standardized VA hospital and under Criterion C as an early example of a federal building designed with seismic-resistant buildings technologies and for its Mayan Art Deco design. The period of significance for the updated district is 1934-1941. In December 2011, VA Consultants AECOM prepared NHPA baseline documentation for the SFVAMC, including descriptions of recent, current, and future projects and documentation of historic properties. (A baseline documentation report was provided to the SHPO in December 2011.)

A facilities-wide survey of archeological resources has not been conducted at the existing SFVAMC Fort Miley Campus, and, as such, the prehistoric nature of the specific Campus location is not known. The SFVAMC has conducted archeological surveys for project-level reviews and found no archeological resources within the project areas; the SHPO concurred with each of those findings. Archeological sites have been found in the immediate area of the SFVAMC Fort Miley Campus and reflect the character and nature of early Native American occupation of the Campus and surrounding region.

SFVAMC Historic District
Construction of the SFVAMC hospital and diagnostic center began in 1933, and the hospital was dedicated in November 1934. In 1934, the SFVAMC consisted of twenty-one concrete buildings designed in the Art Deco style with Mayan inspired ornamentation. The original campus was designed by VA architects and built by the Herbert M. Baruch Corporation. The buildings were clustered in the northern and eastern sections of the campus in order to lessen the impact on the adjacent neighborhood, as well as to provide space for patient convalescence and recreation. Several major building campaigns since 1934 have dramatically altered the semi-pastoral character of the campus by adding over a dozen buildings whose design and locations do not support the design plan of the original campus. The large size of many of these new buildings, combined with their awkward siting and incompatible materials and design, have affected the overall integrity of the original campus. In addition, many of the original 1934 buildings have been unsympathetically altered, particularly those that have received large additions. The boundaries of the Historic District do not include most of the latter non-significant buildings.

Projects proposed under the LRDP will affect buildings and structures within the SFVAMC Historic District. The Historic District contains 14 contributing buildings and structures (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 18, 20 and 27) and 8 non-contributing buildings or structures (14, 25, 26, 31, 32, 33, 210, and 202) set on 12 acres of the overall 29-acre Campus.

Fort Miley Military Reservation Historic District
There is another historic district adjacent to the existing SFVAMC Fort Miley Campus that is considered part of the affected environment for historic resources. The Fort Miley Military Reservation Historic District surrounds the Campus to the east and the west. Fort Miley was listed on the National Register in 1980 as part of the Golden Gate National Recreation Area. The NRHP Historic District is divided into two parts as a result of the 1932 transfer of 25 acres (eventually 29 acres total) of land to VA for construction of the Campus. Despite being divided by the site of the former post of Fort Miley, the surviving batteries still
remain in a historic district located in two parts: East Fort Miley and West Fort Miley. A growth of thick vegetation obscures some views from both portions of the Historic District. Fort Miley is significant for its association with the early 20th century coastal defense system on the West Coast. Fort Miley Military Reservation retains a high level of integrity, particularly around its battery walls.

Finding of Effect

The VA has contracted with AECOM to assist with the preparation of Section 106 coordination materials and public involvement tasks for the undertaking (the LRDP). At this time, we anticipate that the Baseline Documentation previously provided to your office will serve as the technical studies supporting the identification of historic properties. Our next submittal to your office will be a Finding of Effect (FOE) report that discusses previous historic properties identification efforts at SFVAMC, and analyzes the effects of the LRDP on historic properties (both archeological and architectural). Section 106 criteria for adverse effect will be applied to determine whether the LRDP has adequately provided for the protection of historic properties as part of the LRDP’s goals, guidelines, and phased development plans, or whether there are aspects of the LRDP that, if implemented, could impair the integrity of historic properties within the APE.

This analysis will be based on a thorough review of the LRDP. As mentioned previously, based on the extensive input from the public and interested agencies, we have determined that an LRDP is the more appropriate planning tool for our purposes. As such, we are shelving the previous Institutional Master Plan and are in the process of preparing the LRDP. The first public review of the LRDP is scheduled to be released at the same time as the public Draft EIS.

Recognizing that an historic district is more than just a sum of its buildings, the LRDP’s proposed landscaping, traffic circulation, and construction plans will be assessed for their potential to adversely affect the SFVAMC Historic District or other historic properties in the APE. The FOE will also consider the potential for the proposed construction projects to disturb archaeological resources and the potential for visual impacts on adjacent historic properties such as the Fort Miley Military Reservation Historic District.

Summary

The VA would like to initiate consultation on the SFVAMC LRDP in accordance with Section 106 requirements of the NHPA. We request your comments and concurrence with the definition of the undertaking, proposed approach for Section 106 coordination documents (Finding of Effect), and the delineation of the APEs. We are also interested in streamlining the Section 106 public involvement process with the NEPA process, as afforded by the Section 106 regulations, and would appreciate the opportunity to discuss this approach described above.

Should you have any questions about this project, please contact Ken Carrico, AIA, Chief, Engineering Service at ken.carrico@va.gov or (415) 725-4470.

Sincerely,

[Signature]

Lawrence H. Carroll
Medical Center Director

Enclosures: Exhibit 1 (Location of SFVAMC Fort Miley Campus within Urban Context of San Francisco)
Exhibit 2 (Existing SFVAMC Fort Miley Campus)
Exhibit 3 (Location of Off-site Portion of EIS Alternative 2)
Exhibit 4 (Archaeological and Architectural Areas of Potential Effect)
Exhibit 5 (SFVAMC Historic District)
Tables 2, 3, and 4 from the December 2012 Baseline Documentation
CC: from left:
Doug Pulak
Deputy Federal Preservation Officer
Historic Preservation Office (00CFM1)
Office of Construction & Facilities Management
Department of Veterans Affairs
810 Vermont Avenue, NW
Washington, DC 20420

Brian Lusher
Advisory Council on Historic Preservation
Old Post Office Building
1100 Pennsylvania Avenue, NW, Suite 803
Washington, DC 20004

Paul Scolari, Ph.D., Historian and American Indian Liaison
National Park Service, Golden Gate National Recreation Area
Building 101, Fort Mason
San Francisco, CA 94123
Exhibit 1: Location of SFVAMC Fort Miley Campus within Urban Context of San Francisco
Exhibit 2: Existing SFVAMC Fort Miley Campus
Exhibit 3: Location of Off-Site Portion of EIS Alternative 2
Source: SFVAMC Institutional Master Plan

Exhibit 4: Archaeological and Architectural Areas of Potential Effect
<table>
<thead>
<tr>
<th>Date/Number</th>
<th>Building/Project Details</th>
<th>NEPA</th>
<th>Section 106</th>
</tr>
</thead>
<tbody>
<tr>
<td>n/a 662-323</td>
<td>Emergency Room/E&amp;A Renovation</td>
<td>July 2010 ribbon cutting/completion</td>
<td>Construction of 2-story wing (D) on Building 205. Was designed to accommodate a 4th floor in the future, which is now in preliminary planning.</td>
</tr>
<tr>
<td>n/a 662-06-116</td>
<td>Building 1, 8, 9, 10, and 11 Window Replacement</td>
<td>Started with 2005 contract for design</td>
<td>Replacement of all windows with aluminum frame windows.</td>
</tr>
<tr>
<td>n/a 662-09-001</td>
<td>Building 8 Window Replacement</td>
<td>Completed 11/10/2010</td>
<td>Replacement of all windows on the building with aluminum frame windows.</td>
</tr>
<tr>
<td>n/a 662-08-215</td>
<td>Buildings 9 and 10 Window Replacement</td>
<td>Completed 11/19/2008</td>
<td>Replacement of all windows on the building with aluminum frame windows.</td>
</tr>
<tr>
<td>n/a 662-08-222</td>
<td>Replace Windows Building 1</td>
<td>Completed 1/6/2010</td>
<td>Replacement of all windows on the building with aluminum frame windows.</td>
</tr>
<tr>
<td>n/a 662-09-723</td>
<td>Water Tower (Building 206) Repainting and Minor Upgrades</td>
<td>Repainting, minor repair/upgrades</td>
<td>Building 205 (water tower)</td>
</tr>
<tr>
<td>Table 2: Current Projects</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>--------------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Project</strong></td>
<td><strong>Description</strong></td>
<td><strong>Estimated Completion</strong></td>
<td><strong>Size</strong></td>
</tr>
<tr>
<td><strong>1.1 562-401</strong></td>
<td>Building 42 (Research/Lab Space)</td>
<td>November 2011</td>
<td>9,450 BGSF, 2 stories</td>
</tr>
<tr>
<td><strong>1.2 562-C51-12</strong></td>
<td>Mental Health Parking Garage</td>
<td>November 2011</td>
<td>100% design, Construction completion estimated November 2011</td>
</tr>
<tr>
<td><strong>1.3 562-607</strong></td>
<td>Building 24 Mental Health Clinical Expansion</td>
<td>November 2011</td>
<td>At 35% design, originally estimated to go to construction fall 2012, being reconstructed for later finding pending Section 106 process</td>
</tr>
<tr>
<td><strong>1.4 562-501</strong></td>
<td>Seismic Upgrade of Buildings 9, 10, &amp; 13 and Building 22 Construction</td>
<td>December 2012</td>
<td>BGSF 8,743, 2 stories</td>
</tr>
<tr>
<td>1.5</td>
<td>662-608</td>
<td>Veterinary Medical Unit Facility Replacement and Expansion Project (formerly called &quot;Vivarium&quot;)</td>
<td>100% design, 0% construction. Project construction schedule starts 12/1/2011 to 6/1/13 (likely March 2012 +14 months)</td>
</tr>
<tr>
<td>1.7</td>
<td>662-620</td>
<td>Patient Welcome Center-Phase 1</td>
<td>At 35% design; originally estimated to go to construction 6/3/2012, being reestimated for later finding pending Section 106 process</td>
</tr>
<tr>
<td>1.8</td>
<td>662-620</td>
<td>Patient Welcome Center-Phase 2</td>
<td>At 35% design; originally estimated to go to construction fall 2012, being reestimated for later finding pending resolution of 106 process</td>
</tr>
<tr>
<td>Location</td>
<td>Construction Status</td>
<td>Purpose or Description</td>
<td>NEPA</td>
</tr>
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</tr>
<tr>
<td>n/a</td>
<td>Construction anticipated December 2011 through June 2012</td>
<td>To reduce fossil fuel-based energy consumption and to increase the use of renewable energy sources through the installation and operation of ground source heat pump systems.</td>
<td>In HD</td>
</tr>
<tr>
<td>602-611</td>
<td>Parking and Emergency Response Structure - Design Phase</td>
<td>100% design 0% construction. Construction scheduled to start July 2012 to May 2013</td>
<td>Visible from HD</td>
</tr>
<tr>
<td>602-600</td>
<td>North Slope Seismic/Geologic Stabilization</td>
<td>100% design 60% construction. Construction scheduled to be completed by January 2012</td>
<td>Adjacent to HD</td>
</tr>
</tbody>
</table>

Document concludes that "effects would be maintained at acceptable levels and would not be considered as adverse effect under Section 106 of the NEPA." Each proposed heat pump would be installed within a new, 4' x 8' structure adjacent to and designed to blend with the served VAMC building in terms of color and style to the extent possible. In addition, the majority of the 29-acre VAMC has been previously disturbed due to prior construction activities. As such, no...archaeological resources are expected to be encountered or affected..."
<table>
<thead>
<tr>
<th>Project Number</th>
<th>Description</th>
<th>Design %</th>
<th>Building 205 in 1973</th>
<th>No Proximity</th>
<th>Plan to CatEx</th>
</tr>
</thead>
<tbody>
<tr>
<td>662-11-186</td>
<td>Seismic retrofit of Building 205 (Central Plan)</td>
<td>Design 2%</td>
<td>Building 205 is 1973</td>
<td>No Proximity</td>
<td>Plan to CatEx</td>
</tr>
<tr>
<td>662-11-507</td>
<td>Install cool roof on Building 200</td>
<td>Construction contract about to be let as of October 2011</td>
<td>Energy efficiency update per Agency goals per Executive Order.</td>
<td>Applying a white coating to Building 200, including its wings (D Wing already done as part of original construction).</td>
<td>Adjacent to HID</td>
</tr>
<tr>
<td>2.1</td>
<td>IT Support Space Expansion</td>
<td>Estimated buildout December 2016</td>
<td>7,000 BGSF</td>
<td>2nd floor addition to Building 207</td>
<td>Adjacent to HD</td>
</tr>
<tr>
<td>2.2</td>
<td>662-11-111 Hybrid Operating Room Expansion</td>
<td>Planned as a design-build contract, estimated buildout June 2017</td>
<td>Cardiac procedures facility; 2,348 BGSF, 1 story</td>
<td>Adding a 4th floor of Building 200 in D Wing</td>
<td>Adjacent to HD</td>
</tr>
<tr>
<td>2.3</td>
<td>OCFM 11-201 Building 1, 6, 8 Seismic Upgrade and Construction of Building 40 (Major - managed by CFM (VA office of construction and facilities management))</td>
<td>0% design; 0% construction</td>
<td>Seismic retrofit of three buildings (Historic District contributors) and construction of a 100,000 BGSF replacement research facility. These (1, 6, 8, and 12) are the VA's last 4 buildings that are on the VA's list of extremely high risk buildings.</td>
<td>First move Bldg 18 to a yet unknown location, then demolish Bldg 11, Building 21, and Temporary Building 23, then build Building 4C (100,000 BGSF research space) adjacent to HD southwest of 2,4,6. Then demolition of Building 12 (outside of HD) introduction of temporary trailers for accommodating people in Buildings 1, 6, then 8 during seismic retrofit.</td>
<td>In HD and Adjacent to HD</td>
</tr>
<tr>
<td>n/a</td>
<td>662-11-201 Hm Radio Room Renovation</td>
<td>No design; 0% construction</td>
<td>Building 1 renovation of the radio/communications center on the top floor. Need clarification about whether anything is being done to windows or the roof</td>
<td>In HD</td>
<td>none</td>
</tr>
<tr>
<td>n/a</td>
<td>662-11-221 Building 8 Window Correction</td>
<td>Replacement windows were the type that tilt down to clean; the clips on top of the lower rail led to operator error; will be made dis-allowable by replacing spring-loaded clips with</td>
<td>Building 8</td>
<td>In HD</td>
<td>none</td>
</tr>
<tr>
<td>Project Name</td>
<td>Details</td>
<td>NEPA</td>
<td>Section 106</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>n/a 662-661</td>
<td>(EOC) Emergency Preparedness/Response Center - Construction Phase</td>
<td>To provide additional parking garage capacity; car bridge from old to new structure. EOC Center to be built within the new garage space.</td>
<td>Visible from HD</td>
<td>Cleared during design with EA/FONSI - see 662-661</td>
<td></td>
</tr>
<tr>
<td>n/a 662-11-07</td>
<td>Battle of the Bulge trail paving</td>
<td>To pave the existing trail from the campus picnic area down to Legion of Honor parking area.</td>
<td>No buildings directly affected.</td>
<td>Adjacent to HD</td>
<td></td>
</tr>
<tr>
<td>n/a 662-511</td>
<td>Seismic Retrofit Building 5 and Building 7</td>
<td>USAEC Solicitation is out</td>
<td>In HD</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
May 11, 2012

Lawrence Carroll, Director
Department of Veterans Affairs Medical Center
4150 Clement Street
San Francisco, CA 94121

Re: Section 106 Consultation for San Francisco Department of Veterans Affairs Medical Center
Draft Long Range Development Plan

Dear Director Carroll:

Thank you for initiating consultation regarding the Veterans Affairs (VA) efforts to comply with Section 106 of the National Historic Preservation Act of 1966 (16 U.S.C. 470f), as amended, and its implementing regulation found at 36 CFR Part 800.

The VA has identified the undertaking as the preparation of a Long Range Development Plan (LRDP) for the San Francisco Medical Center campus (SFVAMC). This document is being prepared to address and support future campus construction, expansion, and preservation planning. Based on information acquired through meetings between the VA and my staff and as provided in your 20 March 2012 submittal, the VA intends to create an additional 600,000 square feet at the SFVAMC campus over the next 20 years. It is my understanding that upon analyzing the potential impacts on historic properties posed by proposed undertakings the VA will submit a finding of effect to my office. Importantly, the VA will continue to consult with my office, the public and interested parties including the National Park Service to assist with their planning process.

In addition, I have the following comments:

1) I concur that the APE has been properly determined and documented pursuant to 36 CFR Parts 800.4 (a)(1) and 800.16(d).

2) I concur the VA has properly defined and established the undertaking pursuant to 36 CFR Part 800.3.

3) I agree with the VA’s approach to the Section 106 process for this undertaking as described in your submittal and as discussed in meetings between my staff and the VA.

Thank you for seeking my comments and considering historic properties as part of your project planning. I look forward to working with the VA toward the effective management of their historic resources. If you have any questions or concerns, please contact Ed Carroll of my staff at (916) 445-7006 or at email at ecarroll@parks.ca.gov.

Sincerely,

Milford Wayne Donaldson, FAIA
State Historic Preservation Officer
CC:

Brian Lusher  
Advisory Council on Historic Preservation  
Old Post Office Building  
1100 Pennsylvania Avenue, NW, Suite 803  
Washington, DC 20004

Kathleen Schamel  
Federal Preservation Officer  
Historic Preservation Office (00CFM)  
Office of Construction & Facilities Management  
Department of Veterans Affairs  
811 Vermont Avenue, NW  
Washington, DC 20420
June 14, 2012

Tim Frye
Acting Preservation Coordinator
San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Subject: National Historic Preservation Act Section 106 Consultation on the San Francisco
Veterans Affairs Medical Center, Long Range Development Plan

Dear Mr. Frye:

The U.S. Department of Veterans Affairs (VA) is preparing a Long Range Development Plan (LRDP) for
the San Francisco Veterans Affairs Medical Center (SFVAMC) at Fort Miley in San Francisco, California. The
SFVAMC is located on a 29-acre site in northwest San Francisco and is a major tertiary care facility that serves as a VA regional referral center for specialized medical and surgical programs. The SFVAMC serves Veterans of the San Francisco Bay Area and northern California coast counties.

The 12-acre SFVAMC National Register Historic District lies within the boundaries of the SFVAMC Fort Miley Campus. The purpose of the LRDP is to establish the road map for the facility development projects necessary to meet the mission of VHA. VHA has identified a need for retrofitting existing buildings to the most recent seismic safety requirements and for an additional currently estimated 600,000 square feet of medical facility space to meet the needs of all San Francisco Bay Area and North Coast Veterans over the next 20 years. Maps depicting the project location and vicinity are attached.

Introduction
The purpose of this letter is to invite you to participate in the Section 106 Process as a consulting party.

The Regulatory Process
Section 106 of the National Historic Preservation Act (NHPA) requires the VA to identify historically significant resources that are located within a proposed project’s area of potential effects and show that project planners and engineers have “taken into account” project effects on properties listed in or eligible for listing in the National Register of Historic Places. The Section 106 process also requires consultation between the VA, SHPO, and the interested public.

The VA has compiled a preliminary list of preservation contacts in compliance with 36 CFR 800.2(c)(3-5). The regulation states that the following shall be considered consulting parties: SHPO, federally recognized Indian Tribes, representatives of local governments, and “certain individuals and organizations with a demonstrated interest in the undertaking... due to the nature of their legal or economic relation to the undertaking or affected properties, or their concern with the undertaking’s effects on historic properties.” The regulations also require that the VA “seek and consider the views of the public in a manner that reflects the nature and complexity of the undertaking and its effects on historic properties.” The VA must provide the interested public with information about the undertaking and its effects on historic properties and seek public comment and input. Members of the public may also provide views on their own initiative for officials to consider in decision making.
In response to these federal regulations, the VA has developed the following criteria for generating the candidate list of consulting parties.

- Individuals or groups who have a demonstrated interest in historic preservation in San Francisco;
- Neighborhood groups or associations whose area or boundary of jurisdictional interest include area within the APE;
- Local, state, or federal government agencies whose boundaries of jurisdictional interest include area within the APE;
- Individuals or organizations that have specifically requested "consulting party" status and have demonstrated a preservation interest.

Participation in this review will ensure that your interests in historic properties within the Area of Potential Effect are considered in the Section 106 process. Whether through public meetings, materials posted on our website, or through direct mailings to consulting parties, the following opportunities for input will be provided:

- VA will provide consulting parties the opportunity to comment on the National Register eligibility of properties located within the APE.
- VA will provide consulting parties the opportunity to comment on the effects the proposed undertaking may have to properties/districts listed or determined eligible for listing in the National Register.
- VA will provide consulting parties the opportunity to comment on proposed measures to minimize harm or proposed mitigation options for NRHP properties/district that would be adversely affected by the proposed undertaking.

If you would like to participate as a designated consulting party, please sign and date this letter (attached) and return it as indicated.

If you or your organization have any concerns regarding specific historic resources within the project area, please contact Susan Lassell at AECOM at susan.lassell@aecom.com or telephone at 415.955.2963.

Sincerely,

Lawrence H. Carroll
Medical Center Director

Enclosure
Please add me to the list of designated consulting parties:

Tim Frye  
Acting Preservation Coordinator  
San Francisco Planning Department  
1650 Mission Street, Suite 400  
San Francisco, CA 94103

__________________________________________  
Signature

__________________________________________  
Date

Additional Contact Information (not required)

Telephone: ________________________________

Email Address: ____________________________

If any of this information needs updating, please make corrections to this page before returning the form to:

Susan Lassell  
AECOM  
150 Chestnut Street  
San Francisco, CA 94111
Source: SFVAMC Institutional Master Plan

Existing SFVAMC Campus  Exhibit 2
June 14, 2012

Stephen S. Noetzel  
San Francisco Veterans Affairs Commission  
3440 25th St. #705  
San Francisco, CA 94110

Subject: National Historic Preservation Act Section 106 Consultation on the San Francisco  
Veterans Affairs Medical Center, Long Range Development Plan

Dear Mr. Noetzel:

The U.S. Department of Veterans Affairs (VA) is preparing a Long Range Development Plan (LRDP) for the San Francisco Veterans Affairs Medical Center (SFVAMC) at Fort Miley in San Francisco, California. The SFVAMC is located on a 29-acre site in northwest San Francisco and is a major tertiary care facility that serves as a VA regional referral center for specialized medical and surgical programs. The SFVAMC serves Veterans of the San Francisco Bay Area and northern California coast counties.

The 12-acre SFVAMC National Register Historic District lies within the boundaries of the SFVAMC Fort Miley Campus. The purpose of the LRDP is to establish the road map for the facility development projects necessary to meet the mission of VHA. VHA has identified a need for retrofitting existing buildings to the most recent seismic safety requirements and for an additional currently estimated 600,000 square feet of medical facility space to meet the needs of all San Francisco Bay Area and North Coast Veterans over the next 20 years. Maps depicting the project location and vicinity are attached.

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If you or your organization have any concerns regarding specific historic resources within the project area, please contact Susan Lassell at AECOM at susan.lassell@aecom.com or telephone at 415.955.2863.

Sincerely,

[Signature]

Lawrence H. Carroll
Medical Center Director

Enclosure
Please add me to the list of designated consulting parties:

Stephen S. Noetzel
San Francisco Veterans Affairs Commission
3440 25th St. #705
San Francisco, CA 94110

________________________________________________________________________
Signature
________________________________________________________________________
Date
________________________________________________________________________

Additional Contact Information (not required)

Telephone: ________________________________

Email Address: ____________________________

If any of this information needs updating, please make corrections to this page before returning the form to:

Susan Lassell
AECOM
150 Chestnut Street
San Francisco, CA 94111
June 14, 2012

Christine S. Lehnertz, Regional Director
National Park Service
333 Bush Street, Suite 500
San Francisco, CA 94104-2828

Subject: National Historic Preservation Act Section 106 Consultation on the San Francisco Veterans Affairs Medical Center, Long Range Development Plan

Dear Ms. Lehnertz:

The U.S. Department of Veterans Affairs (VA) is preparing a Long Range Development Plan (LRDP) for the San Francisco Veterans Affairs Medical Center (SFVAMC) at Fort Miley in San Francisco, California. The SFVAMC is located on a 29-acre site in northwest San Francisco and is a major tertiary care facility that serves as a VA regional referral center for specialized medical and surgical programs. The SFVAMC serves Veterans of the San Francisco Bay Area and northern California coast counties.

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Sincerely,

[Signature]

Lawrence H. Carroll
Medical Center Director

Enclosure
Please add me to the list of designated consulting parties:

Christine S. Lehnertz, Regional Director  
National Park Service  
333 Bush Street, Suite 500  
San Francisco, CA 94104-2828

__________________________________________
Signature

__________________________________________
Date

Additional Contact Information (not required)

Telephone: ________________________________

Email Address: _____________________________

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Susan Lassell  
AECOM  
150 Chestnut Street  
San Francisco, CA 94111
June 14, 2012

Paul Scolari  
National Park Service  
Golden Gate National Recreation Area  
Building 101, Fort Mason  
San Francisco, CA 94123

Subject: National Historic Preservation Act Section 106 Consultation on the San Francisco Veterans Affairs Medical Center, Long Range Development Plan

Dear Mr. Scolari:

The U.S. Department of Veterans Affairs (VA) is preparing a Long Range Development Plan (LRDP) for the San Francisco Veterans Affairs Medical Center (SFVAMC) at Fort Miley in San Francisco, California. The SFVAMC is located on a 29-acre site in northwest San Francisco and is a major tertiary care facility that serves as a VA regional referral center for specialized medical and surgical programs. The SFVAMC serves Veterans of the San Francisco Bay Area and northern California coast counties.

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Sincerely,

[Signature]

Lawrence H. Carroll
Medical Center Director

Enclosure
Please add me to the list of designated consulting parties:

Paul Scolari
National Park Service
Golden Gate National Recreation Area
Building 101, Fort Mason
San Francisco, CA 94123

________________________________________
Signature
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Date

Additional Contact Information (not required)

Telephone: ______________________________

Email Address: ___________________________

If any of this information needs updating, please make corrections to this page before returning the form to:

Susan Lassell
AECOM
150 Chestnut Street
San Francisco, CA 94111
June 14, 2012

Ray Holland  
President  
Planning Association for the Richmond  
5758 Geary Boulevard, Box #356  
San Francisco, CA 94121-2112

Subject: National Historic Preservation Act Section 106 Consultation on the San Francisco Veterans Affairs Medical Center, Long Range Development Plan

Dear Mr. Holland:

The U.S. Department of Veterans Affairs (VA) is preparing a Long Range Development Plan (LRDP) for the San Francisco Veterans Affairs Medical Center (SFVAMC) at Fort Miley in San Francisco, California. The SFVAMC is located on a 29-acre site in northwest San Francisco and is a major tertiary care facility that serves as a VA regional referral center for specialized medical and surgical programs. The SFVAMC serves Veterans of the San Francisco Bay Area and northern California coast counties.

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Sincerely,

[Signature]

Lawrence H. Carroll
Medical Center Director

Enclosure
Please add me to the list of designated consulting parties:

Ray Hclland  
President  
Planning Association for the Richmond  
5758 Geary Boulevard, Box #356  
San Francisco, CA 94121-2112

__________________________________________
Signature

__________________________________________
Date

Additional Contact Information (not required)

Telephone: ________________________________

Email Address: ____________________________

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Susan Lassell  
AECOM  
150 Chestnut Street  
San Francisco, CA 94111
June 14, 2012

Julie Burns  
Friends of Lands End  
3756 Balboa Street, #201  
San Francisco, CA 94121

Subject: National Historic Preservation Act Section 106 Consultation on the San Francisco Veterans Affairs Medical Center, Long Range Development Plan

Dear Ms. Burns:

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Medical Center Director

Enclosure
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Julie Burns  
Friends of Lands End  
3755 Balboa Street, #201  
San Francisco, CA 94121

_________________________________________  
Signature

_________________________________________  
Date

Additional Contact Information (not required)

Telephone: ________________________________

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Susan Lassell  
AECOM  
150 Chestnut Street  
San Francisco, CA 94111
June 14, 2012

Cindy Heitzman, Executive Director
California Preservation Foundation
5 Third St., Ste 424
San Francisco, CA 94103

Subject: National Historic Preservation Act Section 106 Consultation on the San Francisco Veterans Affairs Medical Center, Long Range Development Plan

Dear Ms. Heitzman:

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Medical Center Director

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Cindy Heitzman, Executive Director  
California Preservation Foundation  
5 Third St., Ste 424  
San Francisco, CA 94103

______________________________
Signature

______________________________
Date

Additional Contact Information (not required)

Telephone: ______________________

Email Address: ____________________

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Susan Lassell  
AECOM  
150 Chestnut Street  
San Francisco, CA 94111
June 14, 2012

Anthony Veerkamp
National Trust for Historic Preservation
5 Third Street, Suite 707
San Francisco, California 94103

Subject: National Historic Preservation Act Section 106 Consultation on the San Francisco Veterans Affairs Medical Center, Long Range Development Plan

Dear Mr. Veerkamp:

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Sincerely,

[Signature]

Lawrence H. Carroll
Medical Center Director

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Anthony Veerkamp  
National Trust for Historic Preservation  
5 Third Street, Suite 707  
San Francisco, California 94103

__________________________________________
Signature

__________________________________________
Date

Additional Contact Information (not required)

Telephone: ________________________________

Email Address: ____________________________

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Susan Lassell  
AECOM  
150 Chestnut Street  
San Francisco, CA 94111
June 14, 2012

Robert Obana
Executive Director
Northern California Institute for Research and Education
4150 Clement Street 151NC
San Francisco, CA 94121-1545

Subject: National Historic Preservation Act Section 106 Consultation on the San Francisco Veterans Affairs Medical Center, Long Range Development Plan

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If you or your organization have any concerns regarding specific historic resources within the project area, please contact Susan Lassell at AECOM at susan.lassell@aecom.com or telephone at 415.955.2963.

Sincerely,

[Signature]

Lawrence H. Carroll
Medical Center Director

Enclosure
Please add me to the list of designated consulting parties:

Robert Obana
Executive Director
Northern California Institute for Research and Education
4150 Clement Street 151NC
San Francisco, CA 94121-1545

________________________________________
Signature

________________________________________
Date

Additional Contact Information (not required)

Telephone: ________________________________

Email Address: ____________________________

If any of this information needs updating, please make corrections to this page before returning the form to:

Susan Lassell
AECOM
150 Chestnut Street
San Francisco, CA 94111
June 14, 2012

Sam Hawgood, MBBS
Dean, School of Medicine
Box 0410, 513 Parnassus Ave, Med Sci S224
University of California, San Francisco
San Francisco, CA. 94143 - 0410

Subject: National Historic Preservation Act Section 106 Consultation on the San Francisco Veterans Affairs Medical Center, Long Range Development Plan

Dear Dr. Hawgood:

The U.S. Department of Veterans Affairs (VA) is preparing a Long Range Development Plan (LRDP) for the San Francisco Veterans Affairs Medical Center (SFVAMC) at Fort Miley in San Francisco, California. The SFVAMC is located on a 29-acre site in northwest San Francisco and is a major tertiary care facility that serves as a VA regional referral center for specialized medical and surgical programs. The SFVAMC serves Veterans of the San Francisco Bay Area and northern California coast counties.

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Sincerely,

[Signature]

Lawrence H. Carroll
Medical Center Director

Enclosure
Please add me to the list of designated consulting parties:

Sam Hawgood, MBBS
Dean, School of Medicine
Box 0410, 513 Parnassus Ave, Med Sci S224
University of California, San Francisco
San Francisco, CA. 94143 - 0410

__________________________________________
Signature

__________________________________________
Date

Additional Contact Information (not required)

Telephone: ________________________________

Email Address: ______________________________

If any of this information needs updating, please make corrections to this page before returning the form to:

Susan Lassell
AECOM
150 Chestnut Street
San Francisco, CA 94111
June 14, 2012

Diane B. Wilsey
President, Board of Trustees
Legion of Honor
100 34th Avenue
San Francisco, CA 94121

Subject: National Historic Preservation Act Section 106 Consultation on the San Francisco Veterans Affairs Medical Center, Long Range Development Plan

Dear Ms. Wilsey:

The U.S. Department of Veterans Affairs (VA) is preparing a Long Range Development Plan (LRDP) for the San Francisco Veterans Affairs Medical Center (SFVAMC) at Fort Miley in San Francisco, California. The SFVAMC is located on a 29-acre site in northwest San Francisco and is a major tertiary care facility that serves as a VA regional referral center for specialized medical and surgical programs. The SFVAMC serves Veterans of the San Francisco Bay Area and northern California coast counties.

The 12-acre SFVAMC National Register Historic District lies within the boundaries of the SFVAMC Fort Miley Campus. The purpose of the LRDP is to establish the road map for the facility development projects necessary to meet the mission of VHA. VHA has identified a need for retrofitting existing buildings to the most recent seismic safety requirements and for an additional currently estimated 600,000 square feet of medical facility space to meet the needs of all San Francisco Bay Area and North Coast Veterans over the next 20 years. Maps depicting the project location and vicinity are attached.

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Sincerely,

[Signature]

Lawrence H. Carroll
Medical Center Director

Enclosure
Please add me to the list of designated consulting parties:

Diane B. Wilsey
President, Board of Trustees
Legion of Honor
100 34th Avenue
San Francisco, CA 94121

________________________________________
Signature

________________________________________
Date

Additional Contact Information (not required)

Telephone: ____________________________

Email Address: __________________________

If any of this information needs updating, please make corrections to this page before returning the form to:

Susan Lassell
AECOM
150 Chestnut Street
San Francisco, CA 94111
June 14, 2012

Craig Middleton
Executive Director
Presidio Trust
34 Graham Street, PO Box 29052
San Francisco, CA 94129

Subject: National Historic Preservation Act Section 106 Consultation on the San Francisco Veterans Affairs Medical Center, Long Range Development Plan

Dear Mr. Middleton:

The U.S. Department of Veterans Affairs (VA) is preparing a Long Range Development Plan (LRDP) for the San Francisco Veterans Affairs Medical Center (SFVAMC) at Fort Mason in San Francisco, California. The SFVAMC is located on a 29-acre site in northwest San Francisco and is a major tertiary care facility that serves as a VA regional referral center for specialized medical and surgical programs. The SFVAMC serves Veterans of the San Francisco Bay Area and northern California coast counties.

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Sincerely,

[Signature]

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Medical Center Director

Enclosure
Please add me to the list of designated consulting parties:

Craig Middleton
Executive Director
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34 Graham Street, PO Box 29052
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____________________________________
Signature

____________________________________
Date

Additional Contact Information (not required)

Telephone: __________________________

Email Address: _______________________

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Susan Lassell
AECOM
150 Chestnut Street
San Francisco, CA 94111
June 14, 2012

Cheryl Cook
County Veterans Service Office
27 B Van Ness Avenue
San Francisco, CA 94102

Subject: National Historic Preservation Act Section 106 Consultation on the San Francisco Veterans Affairs Medical Center, Long Range Development Plan

Dear Ms. Cook:

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Sincerely,

[Signature]

Lawrence H. Carroll
Medical Center Director

Enclosure
Please add me to the list of designated consulting parties:

Cheryl Cook
County Veterans Service Office
27 B Van Ness Avenue
San Francisco, CA 94102

__________________________
Signature

__________________________
Date

Additional Contact Information (not required)

Telephone: __________________________

Email Address: __________________________

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Susan Lassell
AECOM
150 Chestnut Street
San Francisco, CA 94111
June 14, 2012

Brian Lusher
Advisory Council on Historic Preservation
Old Post Office Building
1100 Pennsylvania Avenue, NW, Ste. 803
Washington, DC 20004

Subject: National Historic Preservation Act Section 106 Consultation on the San Francisco Veterans Affairs Medical Center, Long Range Development Plan

Dear Mr. Lusher:

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Sincerely,

[Signature]

Lawrence H. Carroll
Medical Center Director

Enclosure
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Brian Lusher
Advisory Council on Historic Preservation
Old Post Office Building
1100 Pennsylvania Avenue, NW, Ste. 803
Washington, DC 20004

________________________________________
Signature

________________________________________
Date

Additional Contact Information (not required)

Telephone: ________________________________

Email Address: ____________________________

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Susan Lassell
AECOM
150 Chestnut Street
San Francisco, CA 94111
## SFVAMC LRDP – Development Program by Phase (Revised June 2012)

<table>
<thead>
<tr>
<th>Phase</th>
<th>Building</th>
<th>Building Gross Square Feet (GSF)</th>
<th>Stories</th>
<th>Construction Start</th>
<th>Construction End</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Phase 1: 2013-2015</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.1</td>
<td>Building 41 (Research)</td>
<td>14,200</td>
<td>2</td>
<td>January 2013</td>
<td>December 2013</td>
</tr>
<tr>
<td>1.1</td>
<td>Building T-17</td>
<td>-1,700</td>
<td></td>
<td>January 2013</td>
<td>December 2013</td>
</tr>
<tr>
<td>1.2</td>
<td>Emergency Operations Center and Building 211 Parking Garage Expansion (477 spaces; 295 net new)</td>
<td>5,000 gsf (2,000 for EOC, 3,000 for storage space) plus 150,000 square feet of new parking garage</td>
<td>5</td>
<td>January 2013</td>
<td>May 2014</td>
</tr>
<tr>
<td>1.3</td>
<td>Building 22 (Hoptel)</td>
<td>8,700</td>
<td>2</td>
<td>January 2013</td>
<td>January 2014</td>
</tr>
<tr>
<td>1.3</td>
<td>Seismic Retrofit Buildings 5, 7, 9, 10, 11, and 13</td>
<td>n/a</td>
<td></td>
<td>January 2013</td>
<td>January 2014</td>
</tr>
<tr>
<td>1.4</td>
<td>Patient Welcome Center and Drop Off Area</td>
<td>14,800 (1,350 is drop off area)</td>
<td>1</td>
<td>August 2013</td>
<td>August 2015</td>
</tr>
<tr>
<td>1.5</td>
<td>Building 24 (Mental Health Clinic Expansion)</td>
<td>15,600</td>
<td>3</td>
<td>May 2014</td>
<td>June 2015</td>
</tr>
<tr>
<td>1.5</td>
<td>Building 20</td>
<td>-2,300</td>
<td></td>
<td>May 2014</td>
<td>June 2015</td>
</tr>
<tr>
<td><strong>Phase 1 Total New Construction</strong></td>
<td></td>
<td><strong>58,300 (208,300 with parking garage)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Phase 1 Total Demolition</strong></td>
<td></td>
<td><strong>-4,000</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Phase 1 Net New Construction</strong></td>
<td></td>
<td><strong>54,300 (204,300 with parking garage)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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6 The Emergency Operations Center and Building 211 Parking Garage square footage in this table reflects both the habitable (center and storage area) and the nonhabitable (parking garage) space planned for construction. Although the SFVAMC Long Range Development Plan discusses habitable square footage, the FOE evaluates the impacts associated with construction of the entire square footage, including nonhabitable space.
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<thead>
<tr>
<th>Phase</th>
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<th>Stories</th>
<th>Construction Start</th>
<th>Construction End</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phase 2: 2015-2023</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.1</td>
<td>Operating Room Expansion (D-Wing)</td>
<td>5,300</td>
<td>1</td>
<td>October 2015</td>
<td>October 2016</td>
</tr>
<tr>
<td>2.2</td>
<td>IT Support Space Expansion</td>
<td>7,000</td>
<td>2</td>
<td>April 2016</td>
<td>October 2017</td>
</tr>
<tr>
<td>2.3</td>
<td>Building 23 (Mental Health Research Expansion)</td>
<td>15,000</td>
<td>3 (+basement)</td>
<td>June 2016</td>
<td>July 2017</td>
</tr>
<tr>
<td>2.4</td>
<td>Building 40 (Research)</td>
<td>100,000</td>
<td>5 (+basement)</td>
<td>October 2016</td>
<td>April 2023</td>
</tr>
<tr>
<td>2.4</td>
<td>Seismic Retrofit Buildings 1, 6, 8</td>
<td>n/a</td>
<td></td>
<td>October 2016</td>
<td>April 2023</td>
</tr>
<tr>
<td>2.4</td>
<td>Building 14 (Removal)</td>
<td>-9,700</td>
<td></td>
<td>October 2016</td>
<td>April 2023</td>
</tr>
<tr>
<td>2.4</td>
<td>Building 18</td>
<td>-6,400</td>
<td></td>
<td>October 2016</td>
<td>April 2023</td>
</tr>
<tr>
<td>2.4</td>
<td>Building 21</td>
<td>-1,700</td>
<td></td>
<td>October 2016</td>
<td>April 2023</td>
</tr>
<tr>
<td>2.4</td>
<td>Building T-23</td>
<td>-900</td>
<td></td>
<td>October 2016</td>
<td>April 2023</td>
</tr>
<tr>
<td>2.4</td>
<td>Building 12</td>
<td>-38,900</td>
<td></td>
<td>October 2016</td>
<td>April 2023</td>
</tr>
<tr>
<td>2.5</td>
<td>Ambulatory Care Center (ACC)</td>
<td>120,000</td>
<td>5 (+basement)</td>
<td>June 2021</td>
<td>January 2023</td>
</tr>
<tr>
<td><strong>Phase 2 Total New Construction</strong></td>
<td></td>
<td><strong>247,300</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Phase 2 Total Demolition</strong></td>
<td></td>
<td><strong>-57,600</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Phase 2 Net New Construction</strong></td>
<td></td>
<td><strong>189,700</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Temporary Construction(^7)</td>
<td>Swing Space (Temporary)</td>
<td>24,000</td>
<td>1</td>
<td>June 2015</td>
<td>June 2016</td>
</tr>
</tbody>
</table>

\(^7\) Not included in total GSF, as it is temporary space