

**State Historic Preservation Office
Michigan State Housing Development Authority**

**Comments on the Marshall, Michigan
Draft Development Agreement (8/5/11) for the
Proposed Oaklawn Hospital Overlay Zone
September 19, 2011**

Background: A Development Agreement between Oaklawn Hospital and the City of Marshall is being proposed in order to establish a process to review work (including rehabilitation, moving and demolition) to contributing historic resources within a proposed hospital overlay zone. A Neighborhood Historic Advisory Committee (NHAC) will be created to review the proposed work. Because the NHAC is not a legal entity and does not have enforcement authority, the city will be the signatory on the Development Agreement with the hospital.

Conclusion: The process proposed here is ineffective and inadequate. The Development Agreement as written gives full authority to the hospital regarding historic resources and provides no checks or balances on their actions. By signing this agreement the city will be vacating its oversight authority over historic resources within the overlay zone in a National Historic Landmark. We are concerned that the city is forfeiting its regulatory authority to a non-governmental entity which would result in their being no mechanism for due process in place. The city's attorney should be consulted on this issue.

Comments on the specific language of the proposed development agreement:

Under the Definitions the appropriate term should be "Historic Resources" not "Historic Structures," a structure is one type of resource. The term "residences" should be eliminated from this definition. A resource could be a theater or library; both types of buildings exist within the proposed overlay zone and do not qualify as "residences."

Neighborhood Historic Advisory Committee (NHAC) – The qualifications for serving on the committee are not adequate. Being a resident of the neighborhood does not automatically qualify a person to make informed decisions about the fate of historic resources in a National Historic Landmark. This committee should include members that have documented training in architecture, historic preservation, and the Secretary of the Interior's Standards for Rehabilitation. Selection criteria should be established. We recommend that at least one member of the committee meet the 36 CFR 61 professional criteria established by the National Park Service.

The purpose of the NHAC should be to provide input to the city regarding the fate of historic resources within the overlay zone, not just the hospital. A representative from the city should be included on the committee. As a National Historic Landmark, the removal of historic resources in the city of Marshall should be more than a neighborhood concern.

The NHAC should not be an advisory committee. The committee should have the ability to protect historic resources when need be.

According to the proposed agreement, the Hospital alone selects NHAC committee members and has the power to remove members if "deemed necessary." No criteria for removal are in place. This does not provide for a system of fair and impartial input.

Under the heading "Process for addressing impact on historic structures," why is the authority to convene a meeting on the removal or demolition of a historic structure in the overlay zone given to the hospital? The city should be the convening authority.

The timeframes presented under 1 are unreasonable. Input should be obtained from the advisory committee at the beginning of any proposed project, not at the end. By the time the committee receives a request to review a proposal (30 to 60 days before its completion) a lot of time and money will already have been spent. The committee will be unable to provide meaningful input as any proposed changes at that point in the process will be considered to be too costly.

Under 2, it should read the NHAC “shall” (not “may”) consider the Secretary of the Interior’s Standards for Rehabilitation in their review of projects.

Under 3.a. it states the “Hospital determines that structure must be removed, and Hospital determines that structure does not warrant the cost of relocation.” There needs to be reasonable criteria developed on which such a determination is made. The hospital should not be the sole source of information or the sole agency to make this determination.

The last paragraph on page 3 of the Development Agreement effectively undermines any contribution made by the NHAC and results in the city of Marshall giving up all authority over the hospital’s actions within the overlay zone.