Urban renewal and the Springfield Health Department: effect of a federal program on a local unit of government.

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URBAN RENEWAL AND THE SPRINGFIELD HEALTH DEPARTMENT:
EFFECT OF A FEDERAL PROGRAM ON A LOCAL UNIT OF GOVERNMENT

A Thesis Presented

by

Max Garber

Submitted to the Graduate School of the
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POLITICAL SCIENCE
URBAN RENEWAL AND THE SPRINGFIELD HEALTH DEPARTMENT: EFFECT OF A FEDERAL PROGRAM ON A LOCAL UNIT OF GOVERNMENT

A Thesis for Master's Degree
by
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CHAPTER I
INTRODUCTION

This thesis is a case study of the effect of a federal program (Urban Renewal) upon the state of Massachusetts and one of its subdivisions, the city of Springfield. Although the time frame of this study are the years 1943 to 1963, it is suggested that this case study will provide an insight into the nature of the relationship between the national, state and local government and in doing so permit a better understanding of the federal system as it has developed to the present time.

"Federalism," Professor Daniel Elazar states, "can be defined as the mode of political organization that unites separate polities within an overreaching political system by distributing power among general and constituent governments in a manner designed to protect the existence and authority of both. By requiring that basic policies be made and implemented through a process of negotiation that involves all polities concerned, federal systems enable all to share in the overall systems, decision-making and executing processes."¹

Federalism is the central characteristic of the American political system of which partnership is a key point. "This partnership," as Elazar suggests, "implies the real distribution of power among several centers that must negotiate cooperative arrangements with one another in order to achieve common goals. This

arrangement is often mislabeled **decentralization** but more appropriately should be called noncentralization.\(^2\) He defines decentralization and noncentralization in the following terms: "**Decentralization** implies the existence of a central authority having a legitimate monopoly of governmental power which can concentrate, devalue, or reconcentrate functions more or less as it pleases. **Noncentralization** on the other hand, is the keystone of every true federal system—implies the constitutional coexistence of a general government and governments with more particularized authority which share governmental power."\(^3\) In further clarification of his concept of noncentralization Elazar claims that, "In the noncentralized American system, there is no central government with absolute authority over the states in the unitary sense, but there is a strong national government coupled with strong state governments that share authority and power constitutionally and practically."\(^4\)

The patterned sharing of government activities by all levels of government is the phrase presently used to denote cooperative federalism. As the phrase indicates, the national and state governments work together in the same areas, sharing functions and therefore power.

\(^2\)Elazar, American Federalism: A View from the States, p. 3.


\(^4\)Elazar, American Federalism: A View from the States, p. 3.
A case in point are the federal public health service officers⁵ who work closely with state health departments relative to communicable diseases and other related health matters.

This intergovernmental collaboration is not a new phenomenon. As Elazar points out, "American governments have traditionally assumed responsibilities not only in response to public demands but, where governments have acted, federal, state and local governments usually have acted in concert. Whether this 'cooperative federalism' was intended by the founders of the Union, or not, it was quickly demonstrated to be necessary. Governments operating in the same territory, serving the same people, generally sharing the same goals, and faced with the same demands, could not maintain a posture of dual federalism."⁶

Dual federalism was a term used by the late Professor Edward S. Corwin to describe that point in time of the late nineteenth and early twentieth century period in which the Supreme Court interpreted the American Constitution as requiring a hands-off relationship between state and national governments. Programs, for example, such as state restrictions upon child labor or state industrial safety laws could be initiated by the states since the Supreme Court ruled that such powers were presumed to be within the area of jurisdiction reserved to the

⁵Federal Public Health Officers serve in the Public Health Service which is the health component of the Department of Health, Education and Welfare.

⁶Intergovernmental Relations, op. cit., p. 11.
states or to the people by the Tenth Amendment. 7

The grant-in-aid system offers perhaps the best proof that dual federalism has been superceded by cooperative federalism since the grant-in-aid system requires federal-state-local cooperation. "Federal assistance," Elazar claims, "has assumed an increasingly important role in financing state and local governments since the turn of the century. State and local government's receipts in the form of Federal aid amounted to nine cents per capita in 1902, less than one percent of their general revenues. The relative importance of federal aid reached a peak at the height of the Depression, fell somewhat during the war years, and rose again in the post-war years." 8

The Federal Urban Renewal program, upon which this thesis is focused, was one of the earliest project grant programs. Urban Renewal is a phrase that came into prominence in the 1950's. It had its beginnings in the early 1930's when it was known as "slum clearance" and in the latter 1930's took on a more significant meaning with the phrase "urban redevelopment." The origin of the new concept "urban redevelopment" is not known. However, Robert Walker was in effect referring to urban redevelopment when he observed that the W.P.A. housing and land use surveys in the 1930's revealed that major housing projects to replace slum dwellings could be made attractive to


private capital under certain conditions. The latter fact gained the interest not only of planners but real estate boards, business men, civic leaders, and local officials.9

The broader concepts of "urban renewal" came into being in 1954 to describe the most comprehensive and potentially the most effective approach to elimination and prevention of urban blight. Urban renewal was referred to as, "An organized effort by a public authority directed to the task of reclaiming or restoring any deteriorated area of substantial size which, under existing conditions, cannot be carried out by the individual owners."10

Immediately after World War II there was a great deal of pressure for federal appropriations to support slum clearance and redevelopment in municipalities. The 1954 amendment to the Housing Act of 1949 enlarged the objectives of the federal government's program for checking urban blight, clearing the worst of slums, rehabilitating where possible and redeveloping where essential. A new concept of urban renewal was also introduced, that is, that the national and local governments cooperate to clear the slums, curb the spread of urban blight, and otherwise rehabilitate and redevelop the blighted areas.

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Although the federal urban renewal grant is directed to the city, the state is not by-passed in the program. The project itself has to conform to specific eligibility requirements and requirements of state¹¹ and federal laws¹² and policies derived from these laws. The state is also involved in that the federal government pays two-thirds of the project cost and the city pays one-third with the state reimbursing the city for one-half of the city cost.

Three levels of government, federal, state and local were involved in Springfield's urban renewal program. The question is raised if all the levels of government acted in concert, as defined by "cooperative federalism," or did the will of one level impose itself upon the other to the detriment of the program?

Did involvement with the federal government result in a useful spillover of positive results for the state and local governments, or did involvement with the federal government lead to a decline in the cooperative relationship between the governments?

The purpose of this thesis is to attempt to answer these questions through a careful analysis of the Springfield experience. We shall begin with a brief history of the city of Springfield with particular reference to that section of the city that was to become the site for a major urban renewal effort.

¹¹Commonwealth of Massachusetts, General Laws (Ter. ed.) Ch.121, Sec. 26J.

CHAPTER II
HISTORY OF THE CITY

William Pynchon and his associates left Roxbury in 1635 to settle in the Connecticut Valley.

The prospect of better trade in the west was no doubt one motive, and the exacting conditions of government, also, must have influenced them. The tendency at Boston to limit qualifications of freemen, and to expand the prerogative of those in authority, had already appeared. The setting up of the standing council for term of life had given rise to serious misgivings in the minds of many. Mr. Pynchon's company purchased the land for the Springfield settlement from the Agawam Indians. The town was limited to 50 families; each inhabitant, that is, head of a family, to have a house lot and an allotment of planting grounds, pasture, meadow, marsh, and timber land.

The land was used primarily for agriculture, but early in the 18th century power from the Connecticut River brought about the erection of many mills.¹

Financial depression followed the Revolutionary War, placing farmers and mill owners in difficult financial plight. Daniel Shays became the hero of these people in attempting to prevent judgments against them for debt. It was at Springfield that Shays met defeat when he tried to capture the United States Arsenal.

By 1837 Springfield was the sixth town in population in the State and third in valuation of its manufactures. Cotton mills, boots, muskets, tanneries, hat factories, paper mills, cabinets and chairs, ploughs, tinware, and five steamboats were built during the year. In

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1883 the advent of the railroad stimulated business. By 1840, 2,558 persons were engaged in Springfield manufacturing.2

"The one characteristic of commercial Springfield which is perhaps most pronounced is the diversity of its industries. The fact that Springfield did not possess any one particular natural advantage suited to the growth of any one particular line of business has made Springfield a broad city in the sense that we speak of broad minded men."3

In the 1600's the heart of the area was Ferry Lane, a thriving business and residential street leading to The Springfield ferry that shuttled between the banks of the Connecticut River. The general area from Ferry to Carew Street, and the sections now known as Round Hill and Brightwood developed as fine residential areas, first as farms and later with great estates.

In the 1800's the revolutionary changes began. First came a bridge south of Ferry Street--this took business away from the ferries and, consequently, away from Ferry Street itself. Then came the railroads, bringing industry to residential areas, and along with it, an immigration of railroad workers and seasonal laborers. In the 1870's the Wason Railroad Passenger Car Manufacturing Company moved to Brightwood, essentially marking the end of this section as a prestige residential area. Also in the 1870's came an influx of immigrants who crowded into older dwellings. Older families began moving out of the area and property became neglected.4

The area remained essentially static during the first half of the twentieth century. No new investment occurred, and the decline

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4 Mason A. Green, op. cit., p. 182.
that accompanied the nineteenth-century transitions continued. Then World War II brought an expansion of defense industry employment and another sudden immigration. This new influx flooded the area and resulted in uncontrolled conversion of many structures to meet the pressures of the war-generated housing demand. This gave the final impetus to conditions of overcrowding property exploitation and neglect.

Leonard Duhl's following description of a central city typifies the Springfield situation:

The central city includes, typically, a business district, a railway and a bus station, a university; Skid Row, a 'hill,' which, though it may be flat, had remained socially elevated amidst the surrounding decay, an island of gracious town houses for the sophisticated and well-to-do; a museum housing a superb collection of pictures from every age and country except in that in which the museum itself was built; and a park. Around these features, and extending far beyond them, miles of seedy tenements and row houses peel and flake, amiable or grim in their degenerate old age. Here, waves of immigration have left behind the least buoyant of their numbers, as the mainstream moves on to flood the surrounding countryside with suburban tracts. Over, under, and through it all, the expressways loop, tunnel and carve their way with the contemptuous indifference of a new order. The metropolis, of which central city is the heart, grows continually, but in the city itself there are sinister portents of decline. Department stores stand empty; buildings are pulled down and turned into parking lots, waiting for better times; offices follow their employees to the suburb. On placards in Detroit a wide-eyed child reaches out exclaiming, 'There is more of everything downtown' -- but every year there is less. 

Many of the problems of urban life are not new. In his discussion of American colonial history Bridenbaugh makes his comment which may be applied to our own times: "By 1690 inhabitants of every colonial village had to face certain problems of urban living which required solution not by individual but by community effort. In the country a man might construct his own home, build his fire, erect his privy, and dispose of his rubbish without thought for the well-being of his neighbors, but in town these things became objects of community concern and gradually of civic ordinance. In the country a man might be little affected by the poverty or wrong-doing of others, but the towns soon discovered their civic responsibility in the combating and control of these social evils."6

Population

From 1950 to 19607 Springfield was one of the few medium sized cities in New England that grew in population. The immigration of negroes, which doubled their population, plus an influx of Puerto Ricans into the same neighborhood accounted for this growth.

The following chart, Table I indicates the majority of non-white population of the greater Springfield area settled in Springfield as of 1960.

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<table>
<thead>
<tr>
<th>City or Town</th>
<th>Male</th>
<th>Female</th>
<th>White</th>
<th>Non-White</th>
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</thead>
<tbody>
<tr>
<td>Agawam</td>
<td>7,853</td>
<td>7,865</td>
<td>15,693</td>
<td>25</td>
</tr>
<tr>
<td>Chicopee</td>
<td>31,766</td>
<td>29,787</td>
<td>60,709</td>
<td>844</td>
</tr>
<tr>
<td>E. Longmeadow</td>
<td>5,061</td>
<td>5,233</td>
<td>10,239</td>
<td>55</td>
</tr>
<tr>
<td>Hampden</td>
<td>1,173</td>
<td>1,172</td>
<td>2,345</td>
<td>0</td>
</tr>
<tr>
<td>Holyoke</td>
<td>24,625</td>
<td>28,064</td>
<td>52,064</td>
<td>625</td>
</tr>
<tr>
<td>Longmeadow</td>
<td>4,939</td>
<td>5,626</td>
<td>10,522</td>
<td>43</td>
</tr>
<tr>
<td>Ludlow</td>
<td>6,884</td>
<td>6,921</td>
<td>13,756</td>
<td>49</td>
</tr>
<tr>
<td>Springfield</td>
<td>83,371</td>
<td>91,092</td>
<td>116,102</td>
<td>13,361</td>
</tr>
<tr>
<td>Westfield</td>
<td>12,783</td>
<td>13,519</td>
<td>26,242</td>
<td>60</td>
</tr>
<tr>
<td>W. Springfield</td>
<td>12,185</td>
<td>12,739</td>
<td>24,841</td>
<td>83</td>
</tr>
<tr>
<td>Wilbraham</td>
<td>3,682</td>
<td>3,705</td>
<td>7,376</td>
<td>11</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>194,322</td>
<td>205,723</td>
<td>384,889</td>
<td>15,156</td>
</tr>
</tbody>
</table>

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As the non-whites moved into the north end, the whites moved from this inner core of the city to the outer city limits. Similarly as negroes moved from the north end the Puerto Ricans moved in. There was never really a negro ghetto area established because of the availability of residential areas on the fringe of the inner core.

Ethnic Considerations

Springfield not only has the greatest number of non-whites of the metropolitan area but it has relatively the largest foreign stock and foreign born population.

Of the foreign stock, people of Canadian origin or descent predominate. Italians have chosen Springfield and the Irish selected Springfield and Holyoke as their main areas of settlement.  

Housing, Income and Occupational Statistics

The low income Negro families, of necessity, found shelter in the deteriorating housing in the proposed urban renewal area. A 1966 report issued by the city planning department indicated that 2,100 non-white, non-elderly families were living in substandard housing.  

The immigration of the negro from the southern rural states ill-fitted them to compete in an area where skilled and semi-skilled

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jobs were available. A lack of education contributed to the problem. Most of the Negro labor force was concentrated in the low-skilled or somewhat semi-skilled occupations. Their income was reflected in Table II, prepared by the Planning Department.

**TABLE II**

<table>
<thead>
<tr>
<th></th>
<th>Lower Income</th>
<th>Marginal Income</th>
<th>Lower Middle Income</th>
<th>Upper Middle Income</th>
<th>High Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>White Household</td>
<td>$0 - $3,000</td>
<td>$3,001 - $4,000</td>
<td>$4,001 - $7,000</td>
<td>$7,001 - $10,000</td>
<td>$10,000 and over</td>
</tr>
<tr>
<td>Non-White Households</td>
<td>23.4%</td>
<td>9.1%</td>
<td>35.9%</td>
<td>20.2%</td>
<td>11.4%</td>
</tr>
<tr>
<td></td>
<td>30.0</td>
<td>15.9</td>
<td>37.0</td>
<td>11.5</td>
<td>5.6</td>
</tr>
</tbody>
</table>

Springfield, then, was a city which found itself with a section of the downtown area that had deteriorated as a result of a sudden immigration of workers during World War II; whose demands for housing could only be met by uncontrolled conversion of the multiple dwelling units; where overcrowding and deterioration of the properties together with the proliferation of junk yards, used car lots and gas stations made it economically unfeasible to resort to rehabilitation rather than clearing by means of urban renewal.

We now look to Springfield's governing institutions and their role in the urban renewal program.

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CHAPTER III
CITY GOVERNMENT

From the 1800's until 1962 the city charter provided for a bicameral legislature with 18 common councilmen elected from individual wards and 8 aldermen elected at large. The bicameral legislative form of government is known as the "weak mayor" form of government since the provisions in the Massachusetts statutes outlining this form of government do not centralize authority in the mayor's office for policy making and the administration of city government. The mayor does not have wide powers to appoint city officials, he does not supervise department programs, and he does not oversee proper enforcement of the law. He does not have the official responsibility for carrying out established policy, for coordinating the efforts of various city departments, and for the general conduct of the administration.

With no direct control from the chief executive inefficient and wasteful procedures may exist in some departments. One may cite for example, the antiquated method of garbage collection which was in effect until 1950 in Springfield. Garbage wagons each drawn by two horses, roamed the city with the wasteful manhours method of pickups at the rear of the property instead of at the tree belt. Further inefficiencies of operation existed in the Streets and Engineering Department's collection of trash from cellars and garages once every six weeks.
Role of the Mayor (1946-1963)

Mayor Daniel B. Brunton (1945-1958)

Democrat Mayor, Daniel B. Brunton could do little else but attempt to focus attention on the inefficiencies of the various departments. His political career began in 1935 when he was elected to fill an unexpired term of a deceased city council member. In 1946 he left his position as a master electrician in a local firm after being elected mayor. He served as mayor until 1958.

His accomplishments in twelve years of office were: the building of a Municipal Hospital; twelve new schools; street paving; and voting machines.¹

However, a lack of planning was apparent during his term of office for one need only to look at the lack of subdivision controls and inadequate zoning controls which allowed home builders to develop the "Sixteen Acres," from Watershop Pond four miles to the Wilbraham town line, into an area of overflowing septic tanks, dust, and mud.

Mayor Thomas J. O'Connor (1958-1962)

A vigorous political campaign by Thomas J. O'Connor, Jr. brought to an end the regime in office of Mayor Brunton. Mayor O'Connor was a member of the Massachusetts House of Representatives (elected in 1952) and a practicing attorney. At age 32 he became one of the youngest men to be elected to the office of mayor in the city

of Springfield. He was quite knowledgeable in the art of politics not only from his service in the State Legislature but as a lawyer in the office of his cousin, Thomas Moriarity, district attorney for 12 years and a "political past master." His campaign was backed by a powerful bloc of Democrats in the area; former Mayor Roger L. Putnam, District Attorney Thomas Moriarity, U. S. Rep., Edward Boland, and Judge Daniel M. Keyes, Jr.

In December, following his election, he announced that he would resign from his post as state representative so that he could devote full time to the mayoralty duties. Anxious to "get things moving" even one week before inauguration, the youthful chief executive planned personally to lead a group to Washington, D. C. to speed up Springfield's Application for Urban Renewal and for a survey in the North End. An executive committee was named to become the nucleus of a Citizens Action Commission.

The assistance of citizen's groups had been of great value and had aided many metropolitan cities throughout the country in securing federal funds for urban renewal. Notable amongst the groups was the Citizens Action Commission in New Haven, Connecticut where Mayor Richard C. Lee had over 500 citizens united in a concentrated effort to improve the city. Mayor O'Connor had promised in his campaign speech that he would appoint a Citizens Action Commission patterned

\[2\text{Springfield Union, January 6, 1953, p. 1.}\]
\[3\text{Ibid., p. 1.}\]
after the one in New Haven which was made up of industrialists, educators, bankers, professional people, contractors, labor officials, civic and religious leaders, utility companies, and railroads. Mayor O'Connor also actively sought a development administrator who could coordinate the urban renewal program.

Mayor O'Connor carried his crusade for action on urban renewal into Washington, D. C., as he had promised. Within the week after inauguration he met with Richard L. Steiner, Commissioner of the Urban Renewal Administration, a division of the Federal Housing and Home Finance Agency. His immediate objective was to obtain approval for $250,000 planning grant. Lending support to the mayor and accompanying him to Washington were Harry P. Hogan, Chairman of Springfield Housing Authority, Ward I Alderman Arthur J. McKenna, Street Superintendent James B. Sullivan, Planning Board Chairman Edward J. Breck, and former Mayor Roger L. Putnam, the latter one of his more prominent campaign backers.5

After six months in office Mayor O'Connor claimed success in his urban renewal effort and others as well. Among his successes were:6 a commitment from the state for a $7,000,000 development and improvement program in the Columbus Avenue - Vernon Street area; construction of a municipal parking facility at Harrison Avenue and Hillman Street; developers of home sites to put in hardened streets at their own expense; department heads not to make replacements of personnel unless the

4Springfield Union, January 6, 1958, p. 2.
Personnel Department and the mayor are convinced that the replacements are necessary; and a school sidewalk program. All of these projects the mayor claimed, would ease the burden on the taxpayer and at the same time build a greater city. The Springfield Taxpayers Association did not share the mayor's optimism. The Association in reviewing the mayor's first six months in office felt that he had shown good intent but much in the way of results since the tax rate took a jump of $4.40 that year which brought the city's rate to an all time high of $67.40 per $1,000 assessed valuation.

The pressing problem of urban renewal together with the demand for change in the form of city government made it difficult for Mayor O'Connor, in 1961, to fend off Attorney Charles V. Ryan, Jr., who was seeking the mayoralty post. Urban renewal because of its complexity of funding and other minutia (which will be discussed in Chapter IV) was not something which could be accomplished overnight. Promises were made but could not be kept.

**Mayor Charles V. Ryan, Jr. (1962-1968).**

Attorney Ryan, who led the successful drive to change the municipal charter, opened his campaign for mayor with an attack on the record of "broken promises and second-rate city management" which marked the two terms of Mayor O'Connor. He also charged that, "Mr. O'Connor's administration has fostered waste, rewarded

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7 *Springfield Union*, p. 1.

inefficiency and overlooked incompetence. The issue is not whether Springfield has put up a few schools and torn down a few buildings, but whether Springfield is keeping pace with New Haven and Hartford and other New England cities in our population range."^{9}

His far ranging attack on O'Connor included an attack on the City Health Department which he charged had neglected to test any of the milk that was sold in Springfield for the past nine month period.\(^{10}\) As the father of six children who drank more than thirty quarts of milk a week,\(^{11}\) Attorney Ryan assumed that the law relative to the testing of milk was being obeyed in Springfield and that proper safeguards were being maintained to protect the health of the consumers. It is of interest that the person in charge of the milk testing program was the brother of Mayor O'Connor. The lack of a full time health commissioner in Springfield also was one of the "deficiencies"\(^{12}\) noted by Attorney Ryan and also was of concern to the Hampden District Medical Society. Springfield had not had a full-time health commissioner after the death of Dr. Cosgriff a year ago. Because there had not been a full-time commissioner the Public Health Council had not met for the previous fifteen months.

O'Connor's supporters came under fire for "attempting to control and intimidate city employees to pledge support to O'Connor."\(^{13}\)

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\(^{12}\) *Springfield Union*, October 3, 1961, p. 2.

\(^{13}\) *Ibid.*, July 6, 1961, p. 3.
Conditions in the North End slum area were dramatically portrayed by means of a tabloid type newspaper\textsuperscript{14} issued by the Ryan for Mayor campaign headquarters.

To fortify his charges a walking tour of the area was arranged by Attorney Ryan accompanied by reporters.\textsuperscript{15} Revealed were an alley choked with hundreds of liquor bottles, smashed and whole. A truck in a nearby yard was being burned out by a junk company. Lighting in an apartment building was dismally inadequate. Evidence of rats and vermin were everywhere. All this charged Attorney Ryan was because of the "foot dragging"\textsuperscript{16} by Mayor O'Connor.

As a result of this vigorous campaign Attorney Ryan unseated Mayor O'Connor and in doing so became the city's first chief executive under its new Plan A Charter, adopted in 1962.\textsuperscript{17}

**Plan A Government**

Plan A increased and broadened the power of the Mayor. It centralized authority in the Mayor's office for policy making and the administration of city government. The mayor would now have wide powers to appoint city officials, to supervise department programs and to oversee the proper enforcement of the laws. He was the official responsible for carrying out established policy, for coordinating the

\textsuperscript{14}Attorney Charles V. Ryan, Jr., mayoralty campaign material on file in the Genealogy Room of the Springfield Municipal Library.


\textsuperscript{16}Ibid., p. 1.

\textsuperscript{17}General Laws of the Commonwealth of Massachusetts, Chapters 43, 43 A and 54 A. (All references to Plan A will be found in the General Laws as noted above).
efforts of the various city departments and for the general conduct of the administration. Plan A government lent itself to prompt executive and administrative action by eliminating the need for City Council approval on most of the Mayor's appointive powers. It lessened the role of the City Council in administrative functions. The City Council retained its financial powers and was to act as a "watchdog" on the Mayor's administration.

Plan A government also eliminated political party designations. Under this charter, Springfield voters were to elect nine members of the City Council, seventeen fewer than before, and one administrative official, two less than before. City officials were to be elected in odd numbered years. The Mayor and City Councilmen would serve two-year terms, school committee members for four years.

Candidates were not identified on the ballot by party designation either in the primary or in the final election. Voters cast their ballots in the primary for a Mayor, nine Councilmen, and three members of the School Committee. The two candidates receiving the highest number of votes for mayor, the eighteen candidates receiving the highest number of votes for City Council, and the six candidates receiving the highest number of votes for School Committee would participate in the final election in November.

Mayor - Under Plan A the Mayor (who is elected for a two year term) as chief administrative officer appoints the policy makers of forty-two of the forty-six city departments, special agencies, commissions, boards and committees. Since most of these appointments are unconfirmed, he can remove the appointees. Exceptions to the
Mayor's removal powers are his appointments to the Housing Authority, the Redevelopment Authority and the License Commission, which must be confirmed by the City Council in accordance with State Laws.

He is a policy maker through use of the veto power and the power to call special council sessions. He has the power and responsibility of submitting the annual budget and of supervising these expenditures. As ceremonial head of the city, he is required to attend numerous community functions.

**City Council** - Under Plan A, nine councilmen are elected city-wide for two year terms. Members serve without pay. The council's function includes enactment of orders and ordinances and holding public hearings. It has the power to make all appropriations to lower the budget and to authorize the sale of bonds.

The City Council appoints the City Clerk who records and keeps the minutes of City Council meetings and has the care and custody of its records, documents, maps, plans and papers. The City Clerk is also the Registrar of Vital Statistics and Records. He records all personal property, mortgages, and issues marriage, dog, hunting, fishing and other licenses.

Although the role of City Council is focused on policy making, it can also question policies of the administration when it feels this is in the public interest. All members of the Council serve on standing committees which study and review matters that fall within their scope and report their findings at the regular meetings.

**School Committee** - Under Plan A the School Committee, composed of seven members, serves without pay. Three are elected at large
every two years, for four year terms. The Mayor is the seventh
member and is chairman of the Committee. The School Committee has
the following authority: (1) it is the policy-making body of the
schools; it appoints a Superintendent of Schools to administer the
policies it adopts; (2) on the recommendation of the Superintendent,
the School Committee appoints, suspends or discharges all school
personnel; (3) it regulates all employees with regard to qualifications
for employment in various types of positions, terms of service, duties,
salaries, leaves of absence and other personnel policies; (4) it
adopts an annual budget each year; (5) it approves bills and executes
schedules of bills for transfers within appropriations; (6) it
determines the general organization and nature of the educational
program including such matters as the numbers and types of schools
and departments to be maintained, and the variety and character of the
sources to be provided; (7) it has control of all school buildings
and grounds and the making of repairs from regular school department
appropriations; (8) it must approve the site for a school building
before it can be acquired by the city and must approve plans for the
construction of, and alteration in, a school building before work
can be started; (9) and with the advice of the Superintendent, it
adopts textbooks and approves courses of study.

With the election of Mayor Ryan and the adoption of the Plan A
Charter, Springfield now had a leader and a governmental structure
that appeared to be conducive to substantial reform. The Mayor was
committed to renew his city and the North End of the city was
selected as the first renewal area.

The U. S. Census of Housing, 1950, indicated that 80% of all residential structures in the area were built in 1919 or earlier. This meant that in order to meet today's standards homeowners had to cope with problems of poor weatherproofing, antiquated heating, inadequate bathroom and kitchen facilities, and poor room layout.  

In order to be eligible for urban renewal under Massachusetts State Law as defined in Section 26J of the Massachusetts Housing Authority Law, an area must be shown to be a substandard or decadent area. The North End Urban Renewal Area was determined on the basis of field surveys to be both a substandard area where dwellings predominated and such dwellings were by reason of dilapidation, overcrowding, faulty design or lack of ventilation, light or sanitation facilities detrimental to safety, health and morals; and a decadent area where buildings existed that owing to physical deterioration, obsolescence, and unfitness for human habitation were detrimental to safety, health, morals and welfare.

A map of the Urban Renewal Plan will be found on the following page.

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CHAPTER IV
THE URBAN RENEWAL PROGRAM

Urban renewal means many things to many people. To some it is the bulldozing of buildings, to others it is the uprooting of an ethnic neighborhood, and to most it is a project paid for by federal funds to clear out slum areas. To relatively young America urban renewal is a new idea. However, to the European the idea is not new. Baron Georges Eugene Haussman transformed the face of Paris during the reign of Napoleon III and despite opposition he created the broad boulevards of Paris, its water supply, sewer systems, bridges, the L'Opera and other public buildings that made the world envious of Paris.¹

What is urban renewal? "Urban renewal is the term used to describe the official program of a community to improve itself through the elimination of slums and blight and the removal of the causes of slum and blighted area, thereby preventing their recurrence."²

Through urban renewal a city seeks to refashion and rebuild its physical plant along modern lines so that it may cope with the many problems of our highly industrialized society—poor housing, decay of the inner city area, neighborhood congestion, inadequate sites for commercial and industrial growth and, the ever-mounting problem of traffic congestion. Urban renewal most usually includes slum clearance

but it is more than that. It is a comprehensive plan to systematically improve an entire neighborhood by means of a variety of techniques including conservation of neighborhoods, repair and remodeling of individual buildings, and installation of necessary public improvements. Title I of the Housing Act of 1949 makes all this possible.3

Title I

Under the procedures established by Title I, a community acquires and assembles properties in a blighted area, using its power of eminent domain where necessary. The procedure also requires the local and federal government to pay the net project cost of urban renewal. The net project cost is the difference between the cost of acquiring, clearing, and preparing the land for its new uses and the return from the resale of the land for its new uses. The redeveloper must pay the fair value for the cleared land.

Under Title I, slum clearance and redevelopment involves more than assembling blighted parcels, demolishing the structures, and disposing of the land. It rehouses displaced families in decent, safe and sanitary dwellings within their financial means. The eligible cost for federal funding of an urban renewal project includes the costs of site improvements and supporting facilities provided by the locality.

These public improvements are necessary to create a stable and

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vital neighborhood and support private reconstruction. This is of particular importance to public health officials, who, in urban renewal projects, frequently see the installation of such facilities as sewers, sewage treatment plants, pumping stations, and water lines which would otherwise not be provided.

The Housing Act of 1954\(^4\) includes a provision which broadens the program concept from slum clearance to urban renewal. Slum clearance and redevelopment are complemented by providing for rehabilitation and conservation of deteriorating areas not yet requiring demolition. The change in this concept recognizes the practical impossibility of eliminating all substandard conditions by acquisition and clearance alone and has as its premise the arresting of blight in areas or neighborhoods which lend themselves to cure. It is, in a sense, preventive medicine without wholesale demolition and the disruption of human contacts and neighborhood character.

A basic principle of Title I is that urban renewal is a local program and a local responsibility. Urban renewal projects are not meant to be federal projects. They are locally conceived, planned, and carried out. The decisions with respect to the selection of project area, the designation of properties to be acquired, properties to be rehabilitated, determination of reuse of the land after it has been cleared, all are made locally. The Federal Government furnishes financial and technical assistance and sees to it that projects comply with Federal, State and local laws and with administrative regulations

of the Housing and Home Finance Agency. The financial aid is broken down as follows: Federal government pays two-thirds of the project cost and the city pays one-third. The state reimburses the city for one-half of the city cost.

Title I uses the term "Local Public Agency" (LPA) in referring to the local body authorized under state enabling legislation to carry out urban renewal projects and to enter into contracts with the Housing and Home Finance Agency. In the State of Massachusetts a Local Public Agency can be either a redevelopment authority or a housing authority. The administration of urban renewal activities resides in the Local Public Agency while the ultimate responsibility for making basic decisions in renewal rests within the elected governing body of the town or city.

Workable Program

In order for a locality to be eligible for financial assistance for an urban renewal project it must meet certain prerequisites. The project itself must conform to specific eligibility requirements and the requirements of state and federal law and policies derived from these laws. As a prerequisite to any federal financial assistance, the local governing body must adopt a Workable Program for Community Improvement and have it certified by the Administrator of the Housing and Home Finance Agency. While the Workable Program is concerned with community-wide rather than project activity, it establishes a framework

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for projects and assists in eliminating and preventing blight. There are seven elements to the Workable Program:

(1) Codes and Ordinances - The basic building, plumbing, electrical and housing codes and the means for their adequate enforcement.

(2) General Plan - Is in effect when the local planning board has approved and supports the policies covering land use, thoroughfares, community facilities, and needed public improvements.

(3) Neighborhood Analyses - This is an examination of each neighborhood and its problems.

(4) Administrative Organization - It must be demonstrated that the community has the administrative resources to achieve the goals of the Workable Program.

(5) Financing - It must be shown that the community has the financial resources for carrying out the other elements of the Workable Program.

(6) Housing for Displaced Families - Involves the development of an effective program for the relocation into decent housing of all families displaced as a result of elimination of slums, code enforcement or any other governmental action.

(7) Citizen Participation - The active support and participation of a well represented Citizen's Advisory Committee is necessary to assure success of the program.

Eligibility for Title I

To qualify for Title I assistance, an urban renewal area must contain deficiencies to a large enough degree that public action is
necessary to eliminate and prevent the spread of blight. Specifically, at least two environmental deficiencies, as for example, blighted and congested. The application for federal project planning funds must be accompanied by a resolution of the local governing body authorizing the application and designating the urban renewal area.

Before a project may be approved for execution, there must be a public hearing, and the local governing body must officially adopt the Urban Renewal Plan, find that it conforms to the general plan for the locality as a whole, and determine that the proposed relocation of families to be displaced is feasible. In the resolution approving the plan, the local governing body also recognizes its responsibility to take certain actions such as vacating streets, accepting new streets, providing needed public facilities, and amend the zoning ordinance, if necessary. The local governing body must take steps to provide funds for the local share of project costs whether they are to be contributed as cash or used to finance public works provided as non-cash grants-in-aid. These obligations of the local government are generally set forth in a cooperation agreement entered into by it and by the local public agency where in Massachusetts it would be a redevelopment or housing authority.

To actually start a specific urban renewal project the Local Public Agency, (referred to as the LPA), submits a "Survey and Planning Application" which contains the necessary findings and evidence that the area is eligible for project planning. During the project planning stage the IPA conducts detailed surveys and studies and prepares the plans and estimates required to undertake the project.
The data on the conditions in the project area are vital in determining the extent to which the project can be carried out by clearance or rehabilitation or a combination of these renewal techniques.

If families are to be displaced from the project area, the LPA must establish the feasibility of a relocation program. Surveys must be made of the number, size, and income of families to be displaced, and any other factors affecting their housing needs. Local relocation standards for decent, safe, and sanitary housing must be established, and the housing market must be surveyed to determine the availability of standard housing. Relocation planning is also carried out for anticipated displacement of both individuals and business concerns. If rehabilitation is involved, intensive surveys are made of the condition of the buildings to establish the structural and economic feasibility of rehabilitation. The financial conditions of the owners and residents must also be studied to determine their ability to make the necessary investments.

Appraisals must be made to set the cost of properties to be acquired; land disposition and marketability surveys are also prepared as a guide to developing the new uses of the land. Plans and cost estimates are prepared for all the other activities involved in carrying out the project, such as the provision of new streets and utilities, the demolition and grading of the area to be cleared, and the construction of necessary supporting facilities. The major product of the planning period is the Urban Renewal Plan. This plan is the formal statement of the goals and objectives of the project,
the treatment to be applied, and the controls over new ones. The plan must be studied by the local governing body in the approval of the project. It is also the basis upon which the Federal Government provides financial assistance.

Another important product of the planning stage of the project is the development of detailed cost estimates which establish the estimated net cost of the project and plan for financing the project. An urban renewal project is financed by an arrangement between the Local Public Agency and the Federal Government which calls for local contributions, federal advances and loans, and ultimately a federal capital grant. The locality's contribution may take the form of cash or non-cash grants-in-aid, such as donations of land, demolition, and removal work, project improvements, certain expenditures by colleges, universities, and hospitals, or public facilities. Net project cost, or loss for purposes of determining the amount of the federal grant, is the total expenditures for project execution activities plus the value of local non-cash grants-in-aid, less the proceeds from the land disposition.

The Federal Government also pays the entire cost of eligible payments for moving expenses to families and businesses who are displaced from an urban renewal area. These relocation grants may be up to $200 for families and $25,000 for businesses.

**Deterioration of Residential Area**

One of the most significant indexes to the deterioration of a residential area is the occupancy ratio. Although overcrowding is not considered a critical factor in the rating of structures, its existence
to any substantial extent is usually an indication of generally poor living conditions. For example in the clearance section of the North End area, 45 percent of the apartment building and 17 percent of the houses were found to be overcrowded.

However, overcrowding is more than a technicality used as a determinant in the rating of structures. It is also a measure of whether the occupants exist or live.

If we ask why we have houses and answer by saying that they are for humans to live in, we seem to have stated a very familiar condition which required neither question nor answer. But what do we mean by live? That is the real question and not one to be easily or lightly answered. Existence is one thing, living is another. Existence implies an indefinite state of merely being and keeping alive. Living implies growth, and a house is therefore something in which people not only live, but in which they should have a fair chance to grow.6

But the house is more than mortar and brick, wood and glass; "The modern house is a biological institution. It is a shelter devoted primarily to the functions of reproduction, nutrition and recreation. To expand the definition a little, the house is a building arranged in such a fashion that meals may be easily prepared and served...that rest and sleep may be enjoyed, that sexual intercourse may take place in privacy, and that the early care of the young may be opportunely carried on...and to these primarily physiological requirements, the provision of space for social companionship, and play and study, and the definition of the house is complete."7

"The deterioration of an area makes it relatively unappealing as a residential area, at least to a great many people. It may become an

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area of last resort to those who cling to it or for sentimental reasons. One thing is in its favor—comparatively cheap rents. It is therefore populated by people who ordinarily cannot afford to live elsewhere. Poverty and physical plight thus go hand in hand. It has been a port of entry for millions of impoverished and dispossessed migrants such as old world immigrants, Negroes from the south, and Puerto Ricans from the slums of San Juan.8

North End Area

And so it was in the Springfield North End Project clearance areas. A predominance of large families of Negroes and Puerto Ricans were crowding into single units.9

The incoming groups were not financially able to maintain the buildings properly and in many cases lacked the interest or technical competence to maintain the standards of the original occupants. Each succeeding group were on a lower economic level. It was inevitable that the end result was property blight.

The North End area cost the city of Springfield 25 percent more to service than any other neighborhood in the city, according to a report by the Chief of Police and the Superintendent of Streets and Engineering in January, 1958. As blight continued to spread, the citizens were subsidizing this area out of their tax money at an


at an increasing rate every year.\textsuperscript{10}

Higher service costs were not peculiar alone to this renewal area. Other cities have the same problem.

Cities have a direct financial interest in slum clearance, for the costs of education, police and fire protection, and public welfare are considerably higher in slums than in other areas. Juvenile delinquency, unemployment and disease flourish in blighted regions. Slum areas account for 45 percent of major crimes, 50 percent of arrests, 55 percent of juvenile delinquency, 50 percent of all diseases, and 35 percent of fires. In Atlanta it was discovered that 53 percent of all city services went to slum regions that paid only 6 percent of the real estate taxes. In Baltimore each acre of slums produced a $25,000 yearly deficit for the city. The people of Newark were informed by a group of experts that their slums were costing them about $14 million a year. Proper housing, it was estimated, would save $700,000 a year by reducing fire losses and communicable diseases.\textsuperscript{11}

Many of the historical characteristics of an independent community are retained by the North End Area. It is, by its physical shape, a well defined geographical area. The Boston and Maine Railroad on the south forms a natural boundary for the urban renewal area, while the Connecticut River on the west defines the area. Semi-public and public properties along Chestnut Street again provide natural boundaries on the northeast, and on the southeast, the boundary runs through the vacant tract between Carew and Stafford Streets. Nearly 932 acres makes up the urban renewal area.

\textsuperscript{10}Personal interview. Mr. Robert Croken, Springfield Redevelopment Authority, May 1969.

Although it is primarily a residential area, the range of land uses within the area is greater than can be found in many independent municipalities. A number of sizeable industrial and wholesaling establishments are located along the Boston and Maine and Boston and Albany Railroads. Commercial uses are widely distributed, with major concentrations along Main Street, Dwight Street, and Columbus Avenue. The residential uses of the North End include virtually the entire range of structural types—from single family dwellings to high rise elevator apartment houses. Community facilities serving all these uses include several public schools, private schools, churches, synagogues, fire houses, and two small parks.

Housing was deteriorating in the area and lacked basic heatir.; and sanitary facilities. Schools were old and obsolete. Streets were narrow and congested. Industry and business caused odor, noise, unsightliness, and congestion in and near residential sections. While private capital was unwilling or unable to risk investment in the area, nevertheless the slum dwelling often returned a handsome profit to the owner.

The negligence of the city in permitting fire traps and disease incubators to be occupied as homes gives a certain value to the obsolete structures and makes it possible for the property owners to adhere longer to their high land prices. If there are enough of the poor and if the city authorities are lax enough, they may be crowded so densely into the buildings that the whole enterprise becomes profitable for the owner.12

Approximately 16 percent of the area was so blighted that complete clearance was determined to be the only feasible treatment in these sections. Housing was twice as substandard as in the remainder of the area. Rehabilitation was undertaken in the remaining position of over 811 acres. This would be done with the cooperation of property owners, tenants, and business. Some spot clearance was necessary.13

The proportion of substandard structures in the rehabilitation area was not as large as in the clearance area, nevertheless it represented a large number of buildings to be dealt with. The basic deficiencies in the rehabilitation section were heating facilities and minor repairs.

**Project Area-Within North End**

The project area which was eligible for redevelopment was that area predominantly residential in character, built-up (that is, congested), and blighted. This project area contained 931.72 acres, of which 767.17 acres or 82.3 percent were in commercial and residential use, thus qualifying as built-up.

A combination of factors arising from its historical development and from a lack of planning during its various stages of development qualified the area as blighted. Spread throughout the area were mixed land uses which were a major blighting factor in all sections of the area. Every cross-town street, in a major part of the primarily

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13Personal interview. Mr. Robert Croken. Springfield Redevelopment Authority, May 1969.
residential area, lined with commercial or industrial establishments, and a great majority of interior streets had mixed uses.

The heavy industrial area, including the railroad, located in the Brightwood neighborhood west of the Boston and Main Railroad was expanding further into the residential area. The main garages for the Springfield Bus Company was located in the area which added a great deal of bus traffic to the congested vehicular traffic that was detrimental to surrounding residential properties. Other incompatible mixed uses such as an ice cream plant, a trucking terminal, and bottling works, also existed in the residential section.

Zoning in the area had a direct bearing on the problem of mixed land use. The undermining of the residential area was contributed by the existing zoning. Although land uses in the project area were predominantly residential, only 13 of the 132 blocks in the area were zoned exclusively residential.

The gridiron street pattern of the project area encouraged penetration of residential neighborhoods by through traffic to and from central business district and bridges. Inadequate street layouts created bottlenecks. A consequence of the poor street pattern was the creation of awkward block sizes and shapes. Some blocks were overly wide so that interior uses developed within the blocks; such uses included warehouses, a lumber yard and a used car lot. Other blocks were too narrow, resulting in residential lots only fifty feet deep. Still other blocks were so irregularly shaped as to cause poor lot layout, or, again encourage poor land use.
In many instances community facilities in the project area were inadequate. Of the six elementary schools in or adjacent to the project area, four were built before 1900 and two before 1920. Although some improvements have been made to the original structures, they were generally inadequate with respect to layout and special facilities such as auditoriums and workshops. Play areas were inadequate in size. One of the schools has been condemned. The junior high school in the area was built in 1903 and is also obsolete with respect to modern facilities; the third floor of this school has been condemned. The total playground area of all seven schools was 5.1 acres. Of this amount, 4.5 acres were divided among three of the seven schools. The junior high school and Jefferson School had no playground at all.

The three playfields and parks in the area had a total of 17 acres. These parks also included playground facilities. Minimum standards for parks and playfields contained in the Springfield Master Plan called for a total of 40 acres of playfield and park land to serve the approximately 20,000 residents in the project area; the existing park area obviously falls short of these standards, which are exclusive of additional minimum school playground requirements of one acre per thousand people.

Most taller apartment houses and tenements were on lots totally inadequate in size, and coverage of lots by such buildings was frequently as high as 75 or 85 percent, especially in the clearance area. The land coverage problem was compounded by the existence of a number of lots with rear yard structures, both residential and non-residential.
The majority of the non-residential establishments had inadequate off street parking facilities or none at all. Interior residential blocks along Main Street and Dwight Street were lined with cars of drivers having business at nearby stores or industries. Most multi-family dwelling structures were located on inadequate lots.

Structural and Dwelling Deficiencies

The consulting firm of Candeub and Fleissing,\textsuperscript{14} were employed to survey the deficiencies found to exist in structures and dwelling units in the urban renewal area, in the clearance area and in the rehabilitation area.

On the basis of survey data 52.7 percent of the structures in the urban renewal area were substandard. Structures in the tentative clearance area showed a substantially greater degree of deterioration than those in the rehabilitation area; 77.9 percent of the 869 structures in the clearance area and 40.1 percent of the 1,734 structures in the rehabilitation area were rated substandard.

Although substandard conditions were most prevalent in residential structures, they were not confined to any one structural type. Broken down by structural use, in the urban renewal area 56.3 percent of the 2,165 residential structures, 38.6 percent of the 313 commercial structures, and 28.4 percent of the 109 industrial structures were considered substandard.

\textsuperscript{14}Candeub and Fleissig, Planning Consultants, New York. Employed by Springfield Redevelopment Authority to survey the North End of Springfield made structural surveys, relocation surveys, studies on population characteristics to support their plan for urban renewal. Report submitted to Springfield Redevelopment Authority 1958.
The three major categories of deficiencies were in general need of repair, lack of heating, and lack of running water. These deficiencies were significantly greater in the clearance section than in the rehabilitation section. Virtually all 99.5 percent of the dwelling structures entered in the clearance section required major repairs to dwelling units. 57 percent did not have adequate heating; 25 percent did not have hot water in each dwelling unit. Of the dwelling units entered, 53.5 percent were inadequately heated and 21 percent had no hot water.

The criteria for the structural and dwelling unit survey used by Candeub & Fleissig will be found in the appendix.

Residential Relocation

The Springfield Housing Authority\textsuperscript{15} was required by law to assist in the relocation of families displaced from the area. It was necessary to give special attention to the particular needs of individual families, minority group families and individuals, and the aged and handicapped.

The residential relocation program was divided into three major elements; 1) Location of standard and desirable rental or sales dwellings for those who seek private housing; 2) Satisfactory relocation of families eligible and desirous of public housing; 3) Measures to meet housing problems of the aged, infirm or others requiring special assistance.

Private Housing

A survey of the families in the project area was conducted in

the spring of 1958.16 Questions were asked of the families relative to size of family, family income, and rehousing needs and preferences. Information obtained was used to estimate the number of families that could be expected to relocate in private and public housing units.

It was ascertained that there was a total of 1,020 families (of 2 or more persons) who needed private relocation housing. Seven hundred and seventy families sought rentals while approximately 250 desired to purchase new housing. The great majority of the 448 individual householders were expected to relocate in rental units. At least 1,300 new private units could be constructed in the project area. Rehabilitation or conversion plus these units would be sufficient to rehouse the 1,020 families and approximately 300 individual householders expected to seek private housing.

Other Provisions Necessary to Meet Commonwealth and Local Requirements

Local planning objectives17 have a direct bearing on the North End Project and the project has been planned as an integral part of the total planning for the community as a whole.

Specific objectives in this regard is stated as follows:

(1) The effectuation of the Plan provides for the development of new industrial facilities and jobs to serve the city's growing economic base.


17Ibid., p. 23.
(2) The effectuation of the Plan will improve the total living conditions in the city by removing an area with deficient housing, by providing for the rehabilitation of residential units which can continue to serve the community's needs, and by providing public housing for low income and elderly families.

(3) The effectuation of the Plan will assist in improving the transportation system in the project area and the city by widening and realigning major streets, by eliminating hazardous and congested streets and intersections, and by accommodating the construction of Interstate Routes 91 and 291.

(4) The effectuation of the Plan will provide for improved recreational and community facilities, in the form of improvements to the Emily Bill Playground, new and improved utilities, and enhancement of semi-public uses.

(5) The Urban Renewal Plan conforms to the Master Plan for the City of Springfield and complies with the local objectives of the city as to appropriate land uses, improved traffic, community and recreational facilities and public improvements.

**Housing Code**

The Housing Code, one of the seven elements necessary to satisfy the requirements of the Workable Program, was in effect in Springfield as a consequence of a 1955 state law\(^8\) (Chapter 140, Sec. 128B through 128F). A copy of that code will be found in the appendix.

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SUMMARY

This summary has attempted to summarize the basic features of the Urban Renewal Program, that is, a community improving itself through the elimination of slums and removing causes which may bring about their recurrence; the use of federal assistance to help carry out the program when local resources are inadequate to do the job.

A prerequisite for the Urban Renewal Program is the Workable Program for Community Improvement in which a city analyzes its problems and assets and sets up a broad schedule for accomplishing its renewal goals. Of the seven elements embraced by the Workable Program, the element of Codes and Ordinances in effect and enforced by the city, is the primary focal point of study in this thesis. It is the enforcement of that code in which the Springfield Health Department was directly involved and which had a direct effect upon that unit of the city government.

With this information it is appropriate, in the next chapter, to study the relationship of the Urban Renewal Program to the Springfield Health Department.
CHAPTER V

SPRINGFIELD HEALTH DEPARTMENT AND ITS RELATION
TO THE URBAN RENEWAL PROGRAM

Creation of the Health Department

The City Council, by ordinance in 1852, outlined the duties of the Board of Health. In 1853 a city physician and health officer, Dr. A. S. Scan, was appointed at a salary of $70 a year. This is the earliest recorded board of health activity. It should be noted at this point that a board of health had been formed, not a health department. There is a difference. In towns selectmen act as boards of health unless the town charter specifies a separate board of health. In cities one of the members of the board of health must be a physician.

A health department consists of a commissioner of health who performs and exercises the duties and powers of a board of health with the advice of an advisory council of health. The commissioner of health must be a citizen of the U. S. who has been graduated from a medical school approved by the state authority for the approval of medical schools, and is either a holder of a degree in public health with at least 2 years full time experience with a responsible position in a public health service or has had four years full time experience

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2The General Laws, Commonwealth of Massachusetts, Chap. 11, Sect. 26-16D.
in a responsible position in such a service. He must be eligible to be registered to practice medicine under the laws of the Commonwealth. He is appointed for a term of five years.

**First Health Commissioner - 1935-1952**

Springfield, advanced in the field of public health, with a new ordinance in 1935 creating a health department with a public health council and a commissioner of public health. Dr. L. Jackson Smith was appointed the first Commissioner of Public Health in 1935. He served until his retirement in 1952.

During the seventeen years of Dr. Smith's term in office as health commissioner only four sanitary inspectors were available to perform all of the sanitary inspections, with the exception of food stores, required of the health department. None of the four inspectors had a formal education beyond high school. The question of whether the four inspectors were political appointees could not be determined by the writer. Any opinion on the subject would have to be conjecture. But the fact remains that there was not available to the Department a staff of trained sanitarians (sanitary inspectors).

It was recognized as early as 1947 by a special public health commission that, public health work "is no longer a casual matter to be carried out by any available lay person, or even by a physician in private practice. It has developed into not one but several professions, each requiring special training and/or experience. It is hard to

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*William A. R. Chapin, M. D., op. cit., p. 95.*
exaggerate the importance of well qualified personnel in health work, and yet we still find the citizens of most cities and towns satisfied to place the responsibility for protecting their lives and their health in the hands of incompetent people."

John D. Millett also recognized the need for competency in performing the work of government and has stated that:

Perhaps it was a canon of Jacksonian democracy that any citizen was competent to perform the work of government. This is clearly and potentially not so today. No ordinary citizen can launch an earth satellite into orbit. No ordinary citizen can teach nuclear physics in a public high school or public university. No ordinary citizen can design and construct a dam. No ordinary citizen can treat mental illness. The list might be prolonged indefinitely.5

Among professionals in the field of public health, including the writer, there has been a recommendation for the past several years that at least one sanitarian be employed for each 15,000 population in a city. Accordingly Springfield should have had at least a staff of 10 sanitarians during Dr. Smith's term of office. But again, it is generally known and almost pathetically accepted among public health personnel, that public health is usually the "poor cousin" in city administration. Only when there is an epidemic or natural disaster does the purse string of city administration begin to loosen.


A research of available annual reports of the health department up until the time of the appointment of Dr. Smith's successor revealed only generalities in terms of activities of the sanitarians. There are no figures available during that period of time of the number of housing inspections made. Nor is there any report from the health department of the beginnings of the deterioration of the North End section of the city which was later designated for urban renewal.

In the early 1940's it was evident to the writer that this area was rapidly on its way to becoming a blighted neighborhood. Where once private dwellings reigned along Railroad Street, gasoline stations and junk yards proliferated.

Private home owners left the immediate area and those retaining absentee possession became "slum landlords." Like a cancer, the blight spread from this neighborhood to engulf a larger neighborhood. Rentals in the blighted area became available to those minority groups who were excluded from other parts of the city. But the rent was not cheap in terms of the facilities offered. It was not uncommon for more than one family to share an apartment in order to be able to meet the rental cost.

The majority of the minority groups moved into this area from the rural south and Puerto Rico. Their lack of knowledge in terms of community sanitation together with their bitterness toward the absentee landlord accelerated the blighting of the neighborhood. It was not uncommon for garbage and rubbish to be tossed out of the windows. Vandalism within and without the dwellings was a common occurrence.
The urgency of the situation did not appear to make its impact upon Dr. Smith and his staff.

In 1948 the then Mayor of the City, Daniel B. Brunton, recognized that the returned veteran of World War II was in dire need of housing for his family. The need was recognized in the Mayor's inaugural address when he acknowledged that, "over 500 applications are on file for housing needs. There are many cases among the applications where the family may be evicted or is living in overcrowded conditions or in substandard quarters." No mention was made of the lack of housing in Mayor Brunton's 1949 annual report. In 1950 he again recognized that housing, "is still the number one problem here and through the United States. We have here in Springfield at the present time 470 temporary housing units of the barracks, Quonset and war housing type of which we naturally do not boast, but which we were able to acquire at a very little cost to alleviate the terrible crisis of the past few years."

From 1951 up until Mayor Brunton's end of term as mayor in 1957 no further mention was made in his inaugural addresses of the crisis in housing sanitation and housing needs of the city. There did not appear any attempt by the Executive Department to arrest the creeping blight in the North End.


Second Health Commissioner - 1952-1958

Upon the retirement of Dr. L. Jackson Smith, Dr. John C. Ayres, well trained in public health and a highly competent physician was appointed in 1953 to fill the position of Health Commissioner of the City of Springfield. Dr. Ayres first mentioned the need for additional environmental health staff in his 1955 annual report.

"Since the scope of the Division of Environmental's responsibility will increase, there is and will continue to be a need for additional especially qualified personnel."\(^8\)

It was during Dr. Ayres' administration that considerable attention was paid to the relationship of the Health Department with that of the housing problem.

In his 1956 annual report Dr. Ayres indicated that his department in cooperation with the Neighborhood Reclamation Committee were successful in having an ordinance adopted for minimum standards for human habitation. Again in 1957 reference was made by Dr. Ayres relative to the housing sanitation problems since "it was evident from the number and nature of nuisance complaints received during the year, that there is a wide field open to correction of housing problems, existing especially in substandard areas."\(^9\) He further stated that, "in spite of much discussion about an endorsement of Urban Renewal, the adoption of an Ordinance establishing the Minimum Standards for Human

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\(^8\)Municipal Register, op. cit., 1956 ed., p. 196.

Habitation, recommendations for neighborhood rehabilitation, etc., the Health Department has been able to do nothing about a program for systematic inspection and enforcement of housing standards. With its available resources, the Department can deal only with the most flagrant violations and then only when it is brought to the Department's attention by a complaint. Resources should be made available to the Department to carry out its responsibility in this phase of its public health program."

**Code Adoption**

The adoption of an ordinance establishing the *Minimum Standards for Human Habitation* mentioned by Dr. Ayres was adopted by the Massachusetts Department of Public Health in March 1955. The new law relative to substandard housing passed by the Legislature in 1954 was intended to supplement the manual published by the Massachusetts Department of Public Health in 1954 entitled *Housing Rehabilitation, An Administration Guide for Community Action*. The new minimum housing standards did not become effective until adopted by the municipality. The new law provided for the local adoption of minimum housing standards by either of the two following methods: 1) a city council or a town meeting may vote to accept the minimum housing standards as adopted by the Massachusetts Department of Public Health in which case a certified copy of acceptance must be deposited with the Secretary of State and the Commissioner of Public Health, and: 2) a local board

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10 *General Laws, op. cit.*, Ch. 140, Sections 128B through 138F.
of health, after giving notice to all persons deemed interested, and after holding a public hearing, may adopt minimum housing standards which are not the same as those adopted by the Massachusetts Department of Public Health. Such standards become effective upon passage by the Board of Health and by publishing once in a newspaper of local distribution.

Under the provisions of the Federal Housing Act of 1954 financial aid in the form of grants and liberalized mortgage insurance is available to municipalities that satisfy the requirements of the Urban Renewal Administration of the U. S. Housing and Home Finance Agency. One of the requirements is that a municipality submit to the Urban Renewal Administration a "workable program" including a comprehensive system of codes and ordinances which will require decent healthful housing. The adoption of the department's new housing standards by a Massachusetts municipality would satisfy this provision.

The adoption of the housing code by the Health Department was necessary since it was one of the requirements of the Urban Renewal Program. Without the code the city could not participate in the program.

O'Connor Administration

With the defeat of Mayor Daniel B. Brunton by Attorney Thomas J. O'Connor, Jr., a sense of awakening was evident in the health department. For instance the new mayor in 1958 augural address promised, "probably the most elaborate rebuilding, reclaiming and renovating of our city will take place in partnership with the Federal Government and private interests in an urban development program. So far reaching are the benefits of such a program as to make them difficult of fine measurement. The program is a symbol of health of our citizens
in better, newer, cleaner housing and recreational areas, of strength for our fiscal affairs—with sources for an increase in tax revenues and improved use of our land areas, with beautification and modernization of the older sections of the city."\textsuperscript{11}

A few months prior to the election of Mayor O'Conor an event occurred which also portended better days for the department's environmental health section. An act establishing a Board of Registration of Sanitarians was approved in August 1957.\textsuperscript{12} This act provided for a board to establish minimum educational and experience qualifications which the applicant had to have before being allowed to take the examination for registration as sanitarians. No longer could a sanitary without the proper educational and experience qualifications be appointed.

But additional positions for sanitarians were not immediately forthcoming. It appeared that Mayor O'Conor had made the usual campaign promises which could not be kept. It would take four more years for two additional inspectors to be added to the staff in 1961. This brought the total to 6 inspectors. The two men were immediately assigned to housing inspection to enforce the Sanitary Code. But this fell far short of the need in the light of demands of the Urban Renewal Programs.

\textsuperscript{11}Municipal Register, \emph{op. cit.}, 1958 ed., p. 9.

\textsuperscript{12}General Laws, \emph{op. cit.}, Ch. 673.
One of the seven basic elements that made up the Workable Program portion of the urban renewal program was that dealing with codes and ordinances. These were necessary to prevent overcrowding of people and structures or to enforce maintenance. There are two principal types of codes and ordinances—those controlling building construction and those controlling housing. The construction codes include the building code, electrical code, fire code, and plumbing code. Housing codes prescribe the minimum conditions under which a structure can be lawfully used for human habitation. They are designed to provide adequate light and air, basic sanitary facilities, safe heating units in every dwelling unit, and to prevent overcrowding. The housing code controls both new and existing dwelling units. The burden rested upon the health department to provide adequate inspectional personnel to enforce the housing code. But such at the moment was not the case.

Dr. Ayres resigned the position of Commissioner of Public Health in 1958 to accept the Superintendency of the newly elected Municipal Hospital. Dr. William Cosgriff was appointed to succeed Dr. Ayres in filling the position of Health Commissioner. Upon Dr. Cosgriff's untimely death in 1960 Dr. Ayres agreed to again accept the duties of the Health Commissioner on a part-time basis.

Ryan Administration

It was the mayoralty election of Attorney Charles V. Ryan, Jr. in 1961 that provided the catalyst for action in both the Urban Renewal Program and the Health Department.
Mayor Ryan kept his campaign promise to get the Urban Renewal Program moving. He also worked closely with the Health Department in creating additional positions for inspectors. His outstanding contribution to the Health Department was his role in the search for a new health commissioner. The city government, with the assistance of the Community Council of Greater Springfield, the local health and welfare planning organization, conducted an exhaustive search for a new commissioner. The city was successful in obtaining the services of a vigorous, capable and dedicated local physician who gave up an extremely fine practice to take over the tremendous responsibilities of the Health Department.

**Developments Under the Third Health Commissioner 1962-1965**

The new commissioner, Dr. Lowell Bellin, provided the Health Department with the kind of vigorous leadership so important to the program of enforcing the housing code and other codes under the department's jurisdiction. Dr. Bellin began his work with the Health Department in October 1962. Dr. Lowell E. Bellin was an excellent administrator who did not fear to challenge some of the influential real estate interests. And he had the backing of the Mayor.

It was essential to the city that progress be shown in order for the city to continue its certification to obtain federally assisted urban renewal program. Mayor Ryan noted the progress of the health department, one of the seven areas of activity required by the federal government in connection with its urban renewal financing program, in
that the appointment of a permanent public health commissioner and the reorganization of the Health Department's environmental health division during 1962, "resulted in a vigorous program for enforcement of the housing code and other codes within the department's jurisdiction. The inspectional staff was more than doubled in size, seven inspection districts were created, a systematic program of inspecting houses in all districts was started, and strict compliance with the housing and other codes was demanded, and, if necessary secured through legal means. Citizens groups in the North End became involved in the code enforcement effort."  

Administrative Changes in the Health Department

One of Dr. Beilin's first administrative acts was to change the inspections made by the sanitarians. Previous to this change in 1962, an alley, a cellar, a garbage can, even a toilet, each counted as a separate inspection. For example, in one record sheet selected at random from the old system, one sanitary reported that he had inspected two alleys, one cellar, ten garbage cans, four toilets, two yards, and a numer of other things, adding up to a grand total of 44 inspections for that day.

Since 1963 the Springfield Health Department had refused to count an inspection of a single garbage can or a single toilet as a separate inspection. Instead, the garbage can, the alley, and the

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the cellar, are all considered part of a single all-inclusive inspection of the house at that address. The present system of recording inspections more accurately portrays the actual productivity of the Division of Environmental Health.

The policy relative to the issuing of notices of violations was changed. It was preferred to rely less on the verbal notice and more on the written notice.

Before March 1962, the Health Department employed five inspectors, two of whom spent 100 percent of their time on housing inspection. After March and before the end of the year, the staff of inspectors was increased to nine, with one of them working full-time on enforcing the housing code and the others spending a consider. le amount of their time on housing work. Early in 1963, one of the inspectors retired, but this was more than offset in April 1963, when two new inspectors were hired.

In April 1963 the full staff of sanitarians visited vacant lots and yards in an unprecedented crash program on illegal dumping and improper storage of rubbish and debris. Inspectors visited practically every yard and vacant lot in the North End, Hill, and Winchester Square sections of Springfield. Over 600 written notices were issued. Most violaters abated the conditions without further action, but, as usual, a small percentage was brought into court. Another program of the Health Department was the crash program on housing in the Puerto Rican section of Springfield. In June 1963 teams of sanitarians visited 96 dwellings in two weeks. Over 368 dwelling units were found to be unsatisfactory. Only 26 units were acceptable according to the State
Sanitary Code.\textsuperscript{14}

The State Sanitary Code was adopted by the Massachusetts Department of Public Health on September 13, 1960. The Sanitary Code Article I dealing with the General Application and Administration and Article II, Minimum Standards of Fitness for Human Habitation amended the Minimum Standards for Fitness for Human Habitation adopted in 1955. A copy of the 1960 State Code, Articles I and II will be found in the appendix of this thesis to afford the reader a ready reference.

\textbf{Expanded Activities}

For the first time, the Health Department began a program for inspecting nursing homes, schools, and camps for children. The department's enforcement of codes relating to restaurants, sewage disposal and camps for children had been intensified through the reorganization of the Environmental Health Division and the strengthening of the staff.

Enforcement of the City's smoke abatement regulations was assigned to the Health Department. The Health Department Commissioner, during 1962, took the initiative in an attempt to establish a regional air pollution district.

The Health Department, during 1962, instituted a vigorous drive against unauthorized dumping of refuse, and did not hesitate to bring

\textsuperscript{14}Adopted by the Massachusetts Department Public Health on September 13, 1960, in accordance with the provisions of Section 5 of Chapter III of the General Laws as amended by Ch. 522 of the Acts of 1959, and by Ch. 172 of the Acts of 1960, in accordance with the procedure required by Ch. 30A of the General Laws.
offenders into court. The department started a rodent control program, and personnel received training in poisoning techniques from the U. S.
Department of the Interior.

During 1962 Dr. Bellin suggested that the formation of a "Municipal Peace Corps" could be a useful technique for securing compliance with the housing code. The proposal caught the imagination of many citizen groups, social workers, and individuals interested in housing and the prevention and elimination of blight in the community.

In heavily populated areas of the community every apartment house and every city block had a representative to the Corps. The organization of block representatives was completed on August 1, 1963. The purpose of the Corps was to see that landlords and tenants alike complied with the housing code. The Corps made arrangements with the Adult Education Division of the Springfield School Department to have courses given on housekeeping and nutrition.

During 1962, the Health Department and the Building Department began a program of exchanging information useful to both departments in the enforcement of codes. The Fire and Police Departments also cooperated with the Health Department in the program for securing housing code compliance.

Because the housing code, of necessity, is written in a style not easily understood by the layman, the Health Department prepared a "lay interpretation" of the code, in both English and Spanish, that was widely distributed in the city. This was designed to secure compliance with the housing code on the part of landlords and tenants who were eager to cooperate with the Health Department, but did not fully
understand what the code required.

Additional benefit gained by the health department in its activities related to urban renewal was the Community Renewal Program analysis of population trends which is potentially useful in determining what and where public health services will be desirable in 5 or 10 years. The Health Department, with this information, can estimate where future child health conference should be established and perhaps which conference can eventually be merged or discontinued. It is useful for public health planners to be informed in advance so that support can be generated from both the government and community.

The Community Renewal Program predictability of economic trends within the city, specifically which industries will expand and which will leave the city, aids in long-term planning for the Health Department's industrial health service activities. It is more strategically feasible to concentrate the effort of cultivating management and labor leadership in a growing local industry than to waste time in a plant that is predicted will be leaving the city.

The future will no doubt see many more new programs instituted by the Health Department as a result of the benefits accrued from its association with the Urban Renewal Program.
CHAPTER VI
CONCLUSION

We have in this thesis examined a federal program, that is urban renewal, in order to determine the effect of such a program upon policies established by the State of Massachusetts and one of its governments, the city of Springfield. This case study of the Springfield Urban Renewal Program indicates the extent to which intergovernmental cooperation was necessary to implement this program.

While the Housing Act of 1954 was predicated on the need for joint national-state local effort to effectuate the urban renewal program, it was made clear in the Act itself that urban renewal begins with the community and its own plans and resources.

Before a community can secure federal aid for its renewal projects, it must draft and submit to the Federal Housing and Home Finance Administration, a Workable Program. The Workable Program is the community's own plan of action in comprehensive form. Adequate local codes and ordinances, effectively enforced, is required as part of the Workable Program.

The Commonwealth of Massachusetts, recognizing that there was not a uniform housing code in its cities and towns which could comply with federal requirements for urban renewal funds, adopted an optional code, Minimum Standards of Fitness for Human Habitation.¹

This cooperative effort on the part of the state made it

¹Commonwealth of Massachusetts, General Laws, Ch. 140, Sec. 128B through Sec. 128F.
possible for local boards of health, as enforcing agents of the housing code, to adopt the code as written. As an illustration, Springfield in 1956 adopted the code.

In 1960 a new state Sanitary Code was approved. Unlike the previous optional code, (Minimum Standards of Fitness for Human Habitation), the new state Sanitary Code was mandatory therefore obligatory on all cities and towns in Massachusetts. Failure of the local boards of health to enforce the Sanitary Code would result in enforcement by the state.

The state also recognizing that adequately trained sanitarians (inspectors) would be required to effectively enforce the housing code, created the Board of Registration of Sanitarians. The Board set standards of education and training as a condition for professional registration. As a consequence it became possible for local boards of health to require that sanitarians be registered. Thus the Springfield Health Department required, as a condition of employment, that all sanitarians were to be Registered Sanitarians.

The Springfield Health Department had not expanded and updated its environmental health program until 1958 when it first became involved with the urban renewal program. Its participation in the program resulted in the expansion of a staff of qualified sanitarians.

2Adopted by the Massachusetts Department of Public Health on September 13, 1960, in accordance with the provisions of Sec. 5 of Ch. 111 of the General Laws as amended by Ch. 522 of the Acts of 1959, and by Ch. 172 of the Acts of 1960, in accordance with the procedure required by Ch. 30A of the General Laws.

3Commonwealth of Massachusetts, General Laws, Ch. 673, Acts of 1957.
This expanded staff, resulting from the impact of the urban renewal requirements, made it possible for the department to begin a program for inspection of schools, children's camps, nursing homes and, restaurants.

An exchange of information between the Health Department and Building Department was instituted for more efficient and effective housing code enforcement. The Fire and Police Departments also cooperated with the Health Department in the program for securing housing code compliance. This new avenue of communication and cooperation between city agencies was a direct result of the city's participation in the urban renewal program.

The Springfield Health Department received positive professional gains from involvement with the urban renewal programs in terms of communicating public health data to community decision makers; in forecasting far in advance what public health services would be needed and where they should be located; in establishing a housing data bank; and in giving opportunities for research in the effects of urban housing environment.

Thus it has been shown that the involvement of the three levels of government, federal-state-local, in the urban renewal program resulted in a positive relationship. It suggests that the grant-in-aid device makes cooperative federalism a reality.

This case study has presented the activities of the Springfield Urban Renewal program for the years 1943 to 1963 and its involvement with the national, state, and local government.
We offer in the next chapter a postscript, The North End: 1975, in reply to questions raised in Chapter I relative to cooperative activity between the three levels of government and whether involvement with the federal government resulted in a useful spillover of positive results for the state and local governments. A review of the urban renewal program is also presented.
CHAPTER VII
THE NORTH END: 1975

To some urban renewal meant the uprooting of neighborhoods without regard to the housing needs of those displaced. Such was not the case in the Springfield Urban Renewal Project. One of the requirements of the program was that the Springfield Housing Authority assist in the relocation of families displaced from the area. It was necessary to give special attention to the particular needs of individual families, minority group families and individuals, and the aged and handicapped.

Families and individuals who were displaced were assisted in relocating to other areas of the city into homes that met the requirements of the Housing Code.

The goals of the Urban Renewal program were not only to serve the city's growing economic needs by retaining and developing industry and commercial facilities but also to improve the housing conditions in Springfield.

Since the beginning of the Urban Renewal program many new dwelling units have been built or are in the process of being completed. More than 200 units of low to moderate income housing has been built in the northwest corner and 83 low to moderate income housing has been built in the northern sector of the urban renewal area. A 168 unit apartment building for the elderly has been completed. This six story structure has one floor devoted to a community center consisting of a kitchen and dining areas and rooms
for crafts, games, and other facilities. An 88 unit townhouse type apartment complex has been completed. This development has 2 to 4 bedrooms and is a cooperative with a board of directors elected from the residents to establish policy. An 83 low to moderate income housing unit is to be constructed. In the southern sector of the renewal area a non-profit organization is constructing more than 600 housing units. The development will be completed in two phases. The first will have 250 three and four bedroom homes and the second phase will involve nearly 400 units of moderate income housing including a ten story highrise for the elderly and people with no children.

People are once again returning to residential living in the reconstructed urban renewal area.

Major commercial construction projects have been completed or are in the process of being completed. Those that have been completed are: a $750,000 bus terminal which has become a focal point for an estimated 10,000 people who use the facility each day; a Holiday Inn has been completed at a cost of $2,000,000. The structure is 13 stories high and contains 265 units; other new structures in the renewal area include the $3,500,000 Post Office and Federal Building; the newspaper building, across from the Federal Building, was constructed at a cost of $10,000,000; diagonally across from the newspaper plant a professional center was constructed. The two level brick structure contains dental offices as well as other medical and commercial enterprises.

There are a few remaining parcels in the renewal area for which there are plans for commercial and residential use and also a new
school.

We proposed the question, in the first chapter of this case study, if there had been a useful spillover of positive results for the state and local government involvement in the urban renewal program. In terms of upgrading the staff of inspectors, in the health department, to a professional level, the answer is yes. The inspection staff was also increased which allowed for increased health related activities in addition to housing inspection.

The state adopted a housing code that met federal requirements. This enabled cities and towns to meet that requirement if they wished to participate in an urban renewal program. The state also established a Board of Registered Sanitarians which enabled health departments to require that inspectors be registered as a condition of employment.

Both the adoption of a housing code and the establishment of a Board of Registered Sanitarians benefits the state health department since it now has assurance that registered inspectors on the local level are qualified to carry on housing inspections that follows a uniform housing code as a guide.

We also questioned if the state and local government involvement with the federal government, in the urban renewal programs, had led to a decline in the cooperative relationship between the governments. We have suggested that cooperation between the levels of federal, state, and local governments, was at a high level. We conclude with a quote taken from a report by Allen R. Andrews, Springfield Development Administrator.
Never in the history of urban renewal program in Springfield have so many agencies and organizations been involved in helping our program to be successful. The progress made on the Brightwood Community School project during the past year has been so important to the Springfield community development effort that a list of the major contributors to this progress is appropriate for inclusion in this report. At the local level, we have Mayor Frank Freedman, the City Council, the School Committee, the School Department, the School Building Commission, and its architects, Perkins & Will, the Planning Board, Planning Department, City Law Department, City Treasurer's Office, and its bond counsel, the firm of Palmer & Dodge, Streets and Engineering Department, Bureau of Traffic Engineering, Fire Department, the Brightwood Neighborhood Council, the Community Council of Greater Springfield, the North End Community Center, the School Department's Title I Parents Advisory Committee, and the Springfield Redevelopment Authority.

Contributing to the effort at the state level were the Massachusetts General Court, State Board of Education, State Department of Education, State Department of Community Affairs, State Department of Public Works, and State Department of Public Safety. At the federal level, there was assistance from the Department of Housing and Urban Development (HUD), the Department of Transportation, and the Office of Congressman Edward P. Boland.¹

Federal involvement in state and local problems need not mean federal domination and control. The right kind of federal initiatives can promote important and enduring cooperative relationships that result in greater benefits for the people than could possibly be achieved by any level of government working independently.

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A P P E N D I X
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CRITERIA FOR STRUCTURAL AND DWELLING UNIT SURVEY

A. CRITERIA FOR RATING STRUCTURES

1. Physical Condition of Structures

The physical condition of a structure is rated as follows:

- In fair condition
- In need of minor repairs
- In need of major repairs (this includes derelict structures)

These ratings are given as follows and on the basis of the criteria given below.

a. Original Construction

Either "adequate" or "poor." Poor original construction is evident in buildings which do not provide adequate protection against the elements because of makeshift original construction, such as outside walls covered with roofing papers or made of packing boxes, scrap lumber or tin, or lack of a foundation so that the outside walls rest directly on the ground.

b. Incompatible Conversion

A dwelling use structure originally designed or intended for another use. Examples are: a one or two car garage or a store converted to dwelling use.

c. Major Repairs

Need of extensive repairs to one or more of the following constitute need of major repairs:

1) Exterior (critical structural elements)

   a) Structure Sag - Evident when building leans or sags to a side, front, or back, or when roof, walls or foundation leans or sags or are not plumb.

   b) Foundation - Require repairs if there are
holes, open cracks, rotted, loose or missing materials.

c) **Walls** - Require repairs when there are holes, open cracks, rotted, loose or missing materials (clapboards, shingles, bricks, concrete, tile or plaster).

2) **Interior** (critical structure elements)

a) **Foundation** - Require repairs if there are holes, open cracks, rotted, loose or missing materials.

b) **Beams, Piers and Joists** - Require repairs when items sag, are cracked, loose, rotted, inadequately supported or missing.

d. **Minor Repairs**

Need of extensive repairs to more than three of the following constitute a need of major repairs.

1) **Exterior** (minor structural elements)

a) **Roof and Cornices** - Require repairs when cornices and flashings are loose, rotted, broken or missing, or when roof surfacing is broken, missing or rotted.

b) **Chimney** - Require repairs when evidence of smoke seepage, broken, loose or missing materials or when chimney sags or leans or is of makeship construction.

c) **Gutters and Downspouts** - Require repairs when gutters and/or downspouts are rotted, broken or missing.

d) **Doors and Windows** - Require repairs when doors and/or window frames are broken, rotted, loose, or have missing panes.

e) **Stairs, Porches and Railings** - Porches, porch railings or stairs require repair if there is evident deep wear on the outside steps or floors, shaky or unsafe porch, porch steps or railings.
2) **Interior** (minor structural elements)
   
a) **Basement Floors** - Require repairs if severely cracked or broken, permit water seepage or are unpaved.
   
b) **Hall Stairs** - Require repairs when stairs tilt to one side, have weak spots or treads, riser or railings are missing and create a hazard.
   
c) **Other Floors** - Hall floors require repairs when they sag or tilt to a side, have excessive weak spots or are missing individual boards.
   
d) **Walls and Ceilings** - Hall walls and ceilings require repairs when there is evidence of sag, missing chunks of plaster or show signs of need of general repairs.
   
e) **Windows and Frames** - Hall windows and frames require repairs when frames are loose, missing, or rotted window panes are broken or missing.

   **e. Summary of Ratings on Structural Condition**

   1) **Fair Condition**

      Structure of adequate original construction not in need of minor or major repairs.

   2) **In Need of Minor Repairs**

      Structure of adequate original condition has been allowed to deteriorate slightly. In such cases, repairs are limited to small areas or isolated instances.

   3) **In Need for Major Repairs**

      Structure of inadequate original construction or one which has been allowed to deteriorate seriously. Such a structure would require extensive repairs to one or more of the critical structural elements listed above, and/or extensive repairs to more than three of the minor structural elements also listed above.
2. **Plumbing and Heating Deficiencies**

   a. **Plumbing Deficiencies**

   Plumbing deficiencies are considered to exist if 30 percent or more of all dwelling units in the structure lack one or more of the following and these facilities cannot be economically, replaced, repaired, rebuilt or added to the building.

   1) a private flush toilet and lavatory basin in good working condition for the exclusive use of the occupants within the dwelling unit.

   2) a private bath or shower, adequately installed, for the exclusive use of the occupants within the dwelling unit.

   3) running hot water within the dwelling unit, connected to the kitchen sink, lavatory basin and bathtub or shower.

   b. **Heating Deficiencies**

   Heating deficiencies are considered to exist if less than 30 percent of the dwelling units in the structure are heated adequately and the provision of adequate facilities cannot be economically accomplished.

3. **Rating of Standard or Substandard Condition**

   The factors evaluated for each structure are divided into two categories: "Critical Deficiencies" and "Minor Deficiencies."

   a. **The Critical Deficiencies are:**

   1) Inadequate original construction.

   2) Incompatible conversion.

   3) In need of extensive minor or major repairs.

   4) Contains one or more dwelling units in need of extensive minor or major repairs.

   5) Lacks adequate plumbing facilities.

   6) Lacks adequate heating facilities.

   b. **The Minor Deficiencies are:**

   1) In need of limited minor repairs.

   2) Lacks adequate light, air and ventilation.

   3) Lacks adequate egress.
4) Has wet basement.
5) Lacks window screens.

c. **Substandard or Critically Deficient Structure**

1) Contains one or more critical deficiencies listed in a. 1)-7) above.

2) Contains four or more minor deficiencies listed in b. 1)-7) above.

d. **Standard Structure**

1) Contains no critical deficiencies listed in a. 1)-7) above.

2) Contains no more than three minor deficiencies listed in b. 1)-7) above.

e. For purposes of analysis and presentation on Form H-6120, "Structures With Deficiencies" and "Substandard Structures" are those structures with one or more of the critical deficiencies listed above under a. 1)-7).

**B. CRITERIA FOR RATING DWELLING UNITS**

1. **Definition of a Dwelling Unit**

A group of rooms or a single room, occupied or intended for occupancy by a family or group of persons living together, or by a person living alone, if it has facilities which are used or intended to be used for living, sleeping, cooking and eating.

2. **Rating of Dwelling Units**

A dwelling unit is rated on the basis of:

- Physical condition
- Basic facilities
- Other factors creating adverse conditions

a. **Condition of Dwelling Unit**

The condition of a dwelling unit is determined by the degree of deterioration found within a dwelling unit. The need for "major repairs" is reported when one or
more of the conditions listed below is/are found to exist to a considerable degree so as to impair the habitability of the unit; or when three or more of the conditions is/are found to exist to a minor degree.

1) **Walls**

Plaster missing over large areas, extensive cracks, sagging or evidence of water seepage from outside.

2) **Floors**

Sagging, extensive weak spots, missing sections or holes.

3) **Ceilings**

Sagging, missing large sections of plaster, evidence of water seepage from outside or floors above.

4) **Window Frames**

Frames and moldings rotted or extensively cracked. Windows frozen or nailed closed. Window panes broken or boarded up, or so warped as not to be weathertight.

5) **Stairs**

Refers to stairs within a dwelling unit; when one dwelling unit occupies two floors within a building. Consider as needing repairs when these stairs or stair railings are weak, tilted, or missing portions of the steps or railings.

6) **Wiring**

Electric wiring that presents a safety hazard. This includes wiring which is improperly strung along floors, walls and ceilings and poorly insulated wiring.

b. ** Dwelling Unit Facilities**

1) **Hot Water**

Running hot water available from the kitchen sink, lavatory basin and bathtub or shower.
2) **Private Bath or Shower**

Adequately installed bathtub or shower and lavatory basin in a bathroom for the exclusive use of the dwelling unit.

3) **Private Toilet**

Private flush toilet for the exclusive use of the dwelling unit.

4) **Adequate Heat**

Every dwelling unit shall be adequately heated with heating facilities which are properly installed, are maintained in safe and good working condition, and are capable of safely and adequately heating all habitable rooms, bathrooms, and water closet compartments in every dwelling unit located therein to a temperature of at least 70°F., at a distance three feet above floor level, when the outside temperature is 0°F.

c. **Other Factors**

1) **Inadequate Conversion**

Same as incompatible conversion. Dwelling unit originally designed and intended for use other than dwelling purposes.

2) **Basement (Cellar) Dwelling Units**

A basement (cellar) dwelling unit is one in which more than half of its clear floor-to-ceiling height is below the average grade of the adjoining ground.

3) **Overcrowded**

Every dwelling unit shall contain at least 150 square feet of floor space for the first occupant thereof and at least 100 additional square feet of floor space for every additional occupant thereof, the floor space to be calculated on the basis of total habitable room area.
In every dwelling unit of two or more rooms, every room occupied for sleeping purposes by one occupant shall contain at least 70 square feet of floor space, and every room occupied for sleeping purposes by more than one occupant shall contain at least 50 square feet of floor space for each occupant thereof.

4) **Ventilation**

Every habitable room shall have at least one window or ventilating skylight facing directly to the outdoors. The minimum total window area, measured between stops, for every habitable room shall be ten percent of the floor area of such room. Whenever walls or other portions of structures face a window of any such room and such light obstruction structures are located less than four feet from the window and extend to a level above that of the ceiling of the room, such window shall not be deemed to face directly to the outdoors and shall not be included as contributing to the required minimum total window area. Whenever the only window in the room is a skylight-type window in the ceiling of such room, the total window area of such skylight shall equal at least ten percent of the total floor area of such room.

5) **Dual Egress**

Each dwelling unit shall have safe, unobstructed means of egress leading to safe and open space at ground level.

3. **Summary of Ratings**

a. **Standard**

A dwelling unit is standard when the unit is:

1) In fair condition or requires only minor repairs;

2) Has adequate facilities with no significant deficiencies; and

3) Is located in a standard structure.
b. **Substandard**

A dwelling unit is substandard when it:

1) Requires major repairs; or

2) Lacks one or more of the "facilities" under 2.b. above; or

3) Is checked for two or more of the "other factors" under 2.c. above; or

4) Is located in a substandard structure.
COMMONWEALTH OF MASSACHUSETTS

Minimum Standards of Fitness

for

Human Habitation

Massachusetts Department of Public Health
Division of Sanitary Engineering 1955

Section 128B. A building, structure, mobile dwelling place, tenement, room or cellar occupied as a dwelling place must be so used and maintained that it shall be fit for such purpose. The Board of Health may examine such buildings, structures, mobile dwelling places, tenements, rooms or cellars in the city or town to determine if any such dwelling place has become, by reason of the number of occupants, uncleanliness or other cause unfit for such purpose, or may become a nuisance or cause of sickness or a cause of home accident to the occupants or to the public. In the absence of regulations adopted under section 128C any building or portion thereof which is leased, rented or occupied as a dwelling place shall comply with the following housing standards:

(1) The building and premises appurtenant thereto shall be kept reasonably clean and free from rubbish.

(2) Floors, ceilings, walls, stairs and windows shall be kept in good repair and serviceable.

(3) Cellar, basement, floors, walls and ceilings shall be reasonably free from dampness.

(4) Water closets and drains therefrom shall be in repair and working order.

(5) Heat generating equipment shall be reasonably adequate

* Chapter 209, approved by the Governor on March 11, 1954, repealed Section 128 of Chapter 111 and substituted Sections 128B, 128C, 128D and 128E. Chapter 447, approved on May 19, 1954, deleted the penalty provisions contained in Section 128D and substituted the penalties now contained in Section 128F.
and in a safe and serviceable condition. If an examination under this section discloses that a building or portion thereof does not so comply, the Board of Health may determine that the building or portion thereof is unfit for human habitation.

Section 128C. The Department of Public Health shall, or a local board of health, may, after notice to all persons deemed interested and a public hearing, make, and from time to time amend, alter or repeal, such regulations as are deemed reasonable and necessary to establish the minimum standards of fitness for human habitation. Such regulations shall be in accordance with accepted standards of public health, sanitation, housing and home safety practice, and may define the responsibilities of owners and tenants. A certified copy of such regulations adopted by the department of public health or local board of health shall be deposited with the State Secretary. Regulations made by the department of public health shall be effective in any city or town upon acceptance in a city by vote of the city council, or in a town by vote of the town. A certified copy of acceptance shall be deposited with the state secretary and the commissioner of public health. Regulations made by a local board of health shall become effective upon passage by the board, and publication once in a newspaper of local distribution. A copy of said regulations shall be available to the public at all reasonable hours in the office of the clerk in such city or town, or in the office of the board of health. Such regulations shall be enforced by such board of health, or health officer, as the case may be.
Section 128D. Upon a determination by the board of health, after examination as provided in Section 128B that a building, tenement, room, cellar, mobile dwelling place or any other structure (a) is unfit for human habitation, (b) is or may become a nuisance, or (c) is or may be a cause for sickness or home accident to the occupants or to the public, it may issue a written order to the owner or occupant to vacate, to put the premises in a cleanly condition, or to comply with the housing standards set forth in section 128B which are not complied with. The order shall be served in the same manner as is provided for the service of an order by Section 124 of Chapter 111. If the owner or occupant refuses to comply with such order, the board of health may cause the premises to be properly cleaned at the expense of the owner or occupant, remove the occupant forcibly and close up the premises, or proceed under Section 128E. Premises closed up under the provisions of this section shall not be occupied as a human habitation without written permission of the board of health.

Section 128E. Instead of proceeding under Section 128D, the board of health, if satisfied that such a building or portion thereof in its town is unfit for human habitation, may issue a written notice to the owner of such building, as appearing in the current records of the assessors of such town, setting forth the particulars of such unfitness and requiring that the conditions be remedied. If the person so notified fails within a reasonable time to remedy the conditions thus set forth, the superior court, on a petition in equity brought by the board of health, shall have jurisdiction, by injunction
or otherwise, to enforce the requirements of the board of health.

Section 128F. Any person who willfully impedes or obstructs the examination by a board of health under Section 128B or who knowingly violates any regulation adopted under the provisions of Section 128C or who knowingly violates any provision of Section 128D shall be punished by a fine of not less than ten or more than fifty dollars for each day of violation.

MINIMUM STANDARDS OF FITNESS FOR HUMAN HABITATION

Adopted by the Massachusetts Department of Public Health on March 8, 1955, in accordance with the provisions of Section 128C of Chapter 111 of the General Laws as amended by Chapters 209 and 447 of the Acts of 1954.

Filed with the Secretary of State, March 22, 1955.

SECTION I. DEFINITIONS

1.1 Dwelling shall mean a building or structure used in whole or in part for human habitation, including all dormitories, dwelling units, and lodging units therein and the premises thereof.

1.2 Dwelling unit shall mean any room or group of rooms located within a dwelling and forming a single habitable unit with facilities which are used or intended to be used for living, sleeping, cooking and eating.

1.3 Garbage shall mean the animal and vegetable or other organic waste resulting from the handling, preparation, cooking and consumption of food.

1.4 Habitable room shall mean a room or enclosed floor space used or intended to be used for living, sleeping, cooking, or eating purposes, excluding bathrooms, water closet compartments, laundries, pantries, foyers, or communicating corridors, closets and storage spaces.
1.5 Infestation shall mean the presence, within or around a dwelling of any insects, rodents or other pests.

1.6 Lodging house shall mean any dwelling, or that part of any dwelling containing one or more lodging units, in which space is let by the owner or operator to five or more persons who are not within the second degree of kinship.

1.7 Lodging unit shall mean a rented room or group of rooms, containing no cooking facilities, used for living purposes by a separate family or group of persons living together or by a person living alone, within a dwelling.

1.8 Occupant shall mean any person living, sleeping or cooking in a dwelling.

1.9 Ordinary minimum winter conditions shall mean 15 degrees Fahrenheit above the lowest temperature recorded for the city or town during the preceding ten year period.

1.10 Owner shall mean any person who, alone or jointly or severally with others:

a) Shall have legal title to any dwelling or dwelling unit, with or without accompanying actual possession thereof; or

b) Shall have charge, care, or control of any dwelling or dwelling unit, as owner or agent of the owner, or as operator, executor, executrix, administrator, administratrix, trustee, or guardian of the estate of the owner. Any such persons thus representing the actual owner shall be bound to comply with the provisions of these minimum standards to the same extent as if he were the owner.

1.11 Plumbing shall mean and include all of the following supplied facilities and equipment; gas pipes, gas-burning equipment, water pipes, garbage disposal units, waste pipes, water closets, sinks, installed dishwashers, lavatories, bathtubs, shower baths, installed clothes washing machines, catch basins, vents, drains, any other similar supplied fixtures, together with all connections to water, sewer, or gas lines.
1.12 Rubbish shall mean combustible and non-combustible waste material, except garbage; and the term shall include such material as the residue from the burning of wood, coal, coke, and other combustible material, paper, rugs, cartons, boxes, wood, excelsior, rubber, leather, tree branches, yard trimmings, grass clippings, tin cans, metals, mineral matter, glass, crockery, and dust.

1.13 Temporary housing shall mean any tent, mobile dwelling place or other structure used for human habitation which is located on a lot or tract of land for less than 30 consecutive days.

1.14 Meaning of certain words. Whenever the words "dwelling," "dwelling unit," "lodging house," "lodging unit" "premises," are used in these minimum standards, they shall be construed as though they were followed by the words "or any part thereof."

SECTION 2. RIGHT OF ENTRY

2.1 The owner or occupant of every dwelling, dwelling unit and lodging unit, or the person in charge thereof, shall give the board of health or its authorized agent free access to such dwelling or dwelling unit, at all reasonable times for the purpose of inspection, examination or survey.

2.2 Every occupant of a dwelling or dwelling unit shall give the owner thereof, or his agent or employee, access to any part of such dwelling, or dwelling unit at all reasonable times for the purpose of making such repairs or alterations as are necessary to effect compliance with the provisions of these minimum standards or with an order issued pursuant to the provisions of these minimum standards.

SECTION 3. PLUMBING

3.1 A safe and adequate supply of water from a source approved by the board of health shall be piped into each dwelling.
3.2 Every dwelling unit shall contain a kitchen sink in good condition and properly connected to water and sewer systems approved by the board of health.

3.3 Every dwelling shall be provided with such number of water closets, lavatories, bathtubs, or showers as the board of health may require but in no case less than one water closet, lavatory, bathtub or shower for each dwelling unit. In lodging houses and dormitories there shall be provided a minimum of one water closet, lavatory and bathtub or shower for every eight persons or part thereof. All plumbing fixtures shall be properly connected to water and sewer systems approved by the board of health.

3.4 Every kitchen sink, lavatory and bathtub or shower required by these minimum standards shall be properly connected to both hot and cold water lines.

3.5 Every dwelling shall have supplied water-heating facilities which are properly installed, are maintained in safe and good working condition, are properly connected with the hot water lines required under the provisions of Subsection 3.4 of Section 3 of these minimum standards, and are capable of heating water to such a temperature and in sufficient quantity to permit an adequate amount of water to be drawn at every required kitchen sink, lavatory basin, bathtub or shower at a temperature of not less than 120 degrees Fahrenheit.

3.6 The water closet and bathtub or shower compartment for each dwelling unit or lodging house shall be accessible from within the building without passing through any part of any other dwelling unit or lodging unit; and such water closet or bathtub or shower compartment shall be separated from all other rooms by walls or partitions that afford privacy.

3.7 No privy shall be constructed or continued in use except by written permission from the board of health. No privy shall be located less than 30 feet from any building used for sleeping or eating, or from any lot line or street. No privy shall be a source of pollution of any water supply or stream.
3.8 Where connection to a public sewer is not practicable, a dwelling shall be served by cesspools, septic tanks or other means of subsurface disposal of sewage, which shall be approved by the board of health and maintained by the owner to the satisfaction of the board of health.

3.9 All plumbing shall be properly installed and maintained in good sanitary working condition, free from defects, leaks and obstructions.

3.10 Every sink, tub, shower, toilet, or other plumbing fixture in a building used for habitation shall be provided with a proper and unobstructed drain which discharges into a sewerage system outside the building, and said fixtures and drains shall be maintained by the owner in a sanitary working condition at all times.

SECTION 4. GARBAGE AND RUBBISH

4.1 Garbage or other organic waste shall be stored in watertight receptacles of metal or other approved material and provided with tight-fitting covers. Sufficient receptacles shall be provided for the maximum needs of the occupants of the dwelling. Mechanical disposal or incineration of garbage may be permitted, provided that such mechanical disposal or incineration methods are specifically approved by the board of health. Receptacles for garbage shall be provided in accordance with Subsection 8.8 of Section 8 of these standards.

4.2 Rubbish or other inorganic waste shall be stored in receptacles of metal or other approved material. Sufficient receptacles shall be provided to take care of the maximum needs of the occupants of the dwelling. Incineration of rubbish may be permitted, provided that such incineration methods are approved by the board of health. Receptacles for rubbish shall be provided in accordance with Subsection 8.8 of Section 8 of these standards.

SECTION 5. LIGHT, VENTILATION, HEATING AND EGRESS

5.1 Every habitable room shall have at least one window or skylight facing directly to the outdoors. The minimum total window or skylight area measured between stops, for every habitable room shall be 10 percent of the floor area of such room. Whenever walls or other
portions of structures face a window or any such room and such light-obstruction structures are located less than 3 feet from the window and extend to a level above that of the ceiling of the room, such a window shall not be deemed to face directly to the outdoors and shall not be included as contributing to the required minimum total window area.

5.2 Every habitable room shall have at least one window or skylight which can be easily opened. The total openable window area in every habitable room shall be equal to at least 45 percent of the minimum window area or minimum skylight area, as required in Subsection 5.1 of Section 5 of these minimum standards, except where there is supplied some other device affording adequate ventilation and approved by the board of health.

5.3 Every bathroom and water closet compartment shall be well lighted and ventilated. Three foot candles of light (three lumens per square foot) shall be provided by either natural or artificial means and shall be available at all times. Such light shall be measured 36 inches from the floor at the center of the room. Every bathroom and water closet compartment shall have at least one window or skylight which can be easily opened. The total openable window area shall be equal to at least forty-five percent of the minimum window area or minimum skylight area as required in Subsection 5.1 of Section 5 of these minimum standards. Such window area requirements of this section may be waived provided that there is an installed mechanical ventilation system approved by the board of health.

5.4 Where there is electric service available from power lines which are not more than 300 feet away from a dwelling, every habitable room shall contain at least two separate wall type electric convenience outlets, or one such convenience outlet and one ceiling or wall type electric light fixture. Every such outlet and fixture shall be properly installed, shall be maintained in good and safe working condition, and shall be connected to the source of electric power in a safe manner. No temporary wiring shall be used except extension cords which run directly from portable electrical fixtures to convenience outlets, and which do not lie under rugs or other floor coverings, nor extend through doorways, transoms or other openings through structural elements.
5.5 Every portion of any interior passageway or staircase common to two or more families in a building used for human habitation shall be illuminated naturally or artificially at all times with an illumination of at least two lumens per square foot (2 foot candles) in the darkest portion of the normally traveled stairs and passageways. Such means of illumination in dwellings occupied by three families or less may be controlled by switches that may be turned on as needed.

5.6 Every means of egress from a dwelling unit or a lodging unit shall be safe and unobstructed.

5.7 Every dwelling shall have heating facilities which are properly installed, are maintained in safe and good working condition, and are capable of safely and adequately heating all habitable rooms, bathrooms, and water closet compartments located therein to a temperature of at least 70 degrees Fahrenheit under ordinary minimum winter conditions. The temperature shall be read at a height of three feet above floor level at the center of the room. Such heating equipment shall be installed and maintained in accordance with the applicable regulations of the Board of Fire Prevention Regulations of the Massachusetts Department of Public Safety.

5.8 Space heaters, except electrical, shall be properly vented to a chimney or duct leading to outdoors.

SECTION 6. MAINTENANCE

6.1 Every foundation, floor, wall, ceiling, door, window, roof or other part of a dwelling shall be kept in good repair and capable of the use intended by its design.

6.2 Every inside and outside stair, every porch and every appurtenance thereto shall be so constructed as to be safe to use and capable of supporting the load that normal use may cause to be placed thereon; and shall be kept in sound condition and good repair. Every stairway having three or more steps shall be properly bannistered and safely balustraded.

6.3 Railings or parapets shall be provided around porches that are higher than thirty inches above ground level, balconies, roofs used for egress or tenancy purposes and/or similar places. Such protective railings or parapets shall be properly balustered and be not less than three feet in height.
6.4 Every roof, wall, window, exterior door and hatchway shall be free from holes or leaks that would permit the entrance of water within a dwelling and be a cause of dampness.

6.5 Every foundation, floor and wall shall be free from chronic dampness.

6.6 Every dwelling shall be free from rodents or vermin. Rodent or vermin extermination and rodent proofing and vermin proofing may be required by the board of health. Rodent and vermin extermination shall be carried out in accordance with Subsection 8.9 of Section 8 of these minimum standards.

6.7 Every dwelling shall be clean and free from garbage and rubbish. When a dwelling or dwelling unit is not reasonably clean or free from garbage or rubbish, the board of health may cause the responsible person in accordance with the provisions of Subsections 8.3 through 8.9 inclusive of Section 8 of these minimum standards to put the dwelling or dwelling unit in a cleanly condition.

6.8 When a wall or ceiling within a dwelling has deteriorated so as to provide a harborage for rodents or vermin, or such wall or ceiling has become seriously stained or soiled, the board of health may order the owner to clean, repair, paint, whitewash or paper such walls or ceilings. Nothing in this standard shall be so construed as to place upon the non-resident owner responsibilities for cleanliness contained in Subsection 3.5 of these minimum standards.

6.9 Ever water closet compartment floor and bathroom floor shall be constructed and maintained so as to be reasonably impervious to water and so as to permit such floor to be kept in a clean and sanitary condition.

SECTION 7. SPACE, USE AND OCCUPANCY

7.1 Every dwelling unit shall contain at least 150 square feet of floor space for the first occupant thereof and at least 100 additional square feet of floor space for every additional occupant thereof, the floor space to be calculated on the basis of total habitable room area.

7.2 In every dwelling unit of two or more rooms, every room occupied for sleeping purposes by an occupant shall
contain at least 70 square feet of floor space, and every room occupied for sleeping purposes by more than one occupant shall contain at least 50 square feet of floor space for each occupant thereof. Notwithstanding the foregoing, in every lodging unit every room occupied for sleeping purposes by one occupant shall contain at least 80 square feet of floor space, and every room occupied for sleeping purposes by more than one occupant shall contain at least 60 square feet of floor space for each occupant thereof.

7.3 At least one-half of the floor area of every habitable room shall have a ceiling height of at least 7 feet; and the floor area of that part of any room where the ceiling height is less than 5 feet shall not be considered as part of the floor area in computing the total floor area of the room for the purpose of determining the maximum permissible occupancy thereof.

7.4 No room in a dwelling may be used for sleeping if the floor level of the room is lower than three and one-half feet below the average grade of the ground adjacent to and within 15 feet of the exterior walls of the room.

7.5 A room located below the level of the ground but with the floor level less than three and one-half feet below the average grade of the ground adjacent to and within 15 feet of the exterior walls of the room may be used for sleeping upon the written permission of the board of health and provided that the walls and floor thereof in contact with the earth have been damp-proofed in accordance with a method approved by the board of health; and provided that the windows thereof are at least 15 feet from the nearest building or wall.

7.6 No temporary housing shall be used without the written permission of the board of health.

SECTION 8. RESPONSIBILITIES OF OWNERS AND OCCUPANTS

8.1 No owner, operator, or occupant shall cause any service, facility, equipment or utility which is required under these minimum standards to be removed from or shut off from or discontinued from any occupied dwelling let or occupied by him, except for such temporary interruption as may be necessary while actual repairs or alterations are in process or during temporary emergencies when discontinuance of service is approved by the board of health. In the event
that any service or utility which the owner or operator has agreed to supply is discontinued the owner or operator shall take immediate steps to cause the restoration of such service or utility.

8.2 The owner of a dwelling located in an area found by the board of health to be infested by rats, insects or other vermin shall carry out such rat stoppage, vermin proofing or other means of preventing or remedying such infestations of said dwelling as may be required by the board of health.

8.3 No owner shall occupy or let to an occupant any vacant dwelling unit or ledging unit unless it is clean and sanitary.

8.4 Every owner of a dwelling containing two or more dwelling or lodging units shall be responsible for maintaining a clean and sanitary condition the shared or public areas of the dwelling and premises thereof.

8.5 Every occupant of a dwelling shall keep in a clean and sanitary condition that part of the dwelling which he occupies and controls.

8.6 Every occupant of a dwelling unit shall dispose of all his rubbish in a clean and sanitary manner by placing it in the rubbish containers required by Subsection 4.2 of Section 4 of these minimum standards.

8.7 Every occupant of a dwelling unit shall dispose of all his garbage and any other organic waste which might provide food for rodents, by placing it in the garbage disposal facilities or garbage storage receptacles required by Subsection 4.1 of Section 4 of these minimum standards.

8.8 It shall be the responsibility of an occupant of a dwelling unit to furnish such garbage and rubbish storage receptacles as are necessary within the dwelling unit. In dwellings containing no more than three dwelling units, it shall be the responsibility of the occupant of a dwelling unit to furnish such additional storage receptacles outside of the dwelling unit as are needed for the storage of garbage and rubbish until removal from the premises. In dwellings containing four or more dwelling units, it shall be the responsibility of the owner to furnish such receptacles outside of the dwelling units as are needed for the storage of garbage and rubbish until removal from the premises.
8.9 Every occupant of a dwelling containing a single dwelling unit shall be responsible for the extermination of any insects, rodents or other pests therein or on the premises; and every occupant of a dwelling unit in a dwelling containing more than one dwelling unit shall be responsible for such extermination whenever his dwelling unit is the only one infested. Notwithstanding the foregoing provisions of this Subsection, whenever infestation is caused by failure of the owner to maintain a dwelling in a rat-proof or reasonably insect-proof condition, extermination shall be the responsibility of the owner. Whenever infestation exists in two or more of the dwelling units in any dwelling, or in the shared or public parts of any dwelling containing two or more dwelling units, extermination thereof shall be the responsibility of the owner.

8.10 Every occupant of a dwelling unit shall keep all plumbing fixtures therein in a clean and sanitary condition and shall be responsible for the exercise of reasonable care in the proper use and operation thereof.

8.11 The owner shall be responsible for compliance with the provisions of Subsection 3.9 of Section 3 and the lighting equipment provisions of Subsection 5.5 of Section 5 of these minimum standards.

SECTION 9. PENALTY, CONFLICT, PARTIAL INVALIDITY AND VARIANCE

9.1 The penalty for violation of any provision of these minimum standards shall be in accordance with the provisions of Section 128F of Chapter 111 of the General Laws as amended.

9.2 In any case where a provision of these minimum standards is found to be in conflict with a provision of any zoning, building, fire, safety, or health law of the Commonwealth or of this municipality existing at the time of publication of these standards, the provision which established the higher standard for the promotion and protection of the health and safety of the people shall prevail.

9.3 If any section, paragraph, sentence, clause, phrase or word of these minimum standards should be declared invalid for any reason whatsoever, such decision shall not affect the remaining portions of these standards, which shall remain in full force and effect; and to
this end the provisions of these standards are hereby declared to be severable.

9.4 The board of health may vary the application of any provision of these minimum standards to any particular case when in its opinion the enforcement thereof would do manifest injustice, provided that the decision of the board of health shall not conflict with the spirit of any provision of these minimum standards. Such variance granted by the board standards. Such a variance granted by the board of health shall be in writing.
COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC HEALTH

THE SANITARY CODE

ARTICLE I

General Application and Administration
Adopted by the Massachusetts Department of Public Health on September 13, 1960, in accordance with the provisions of Section 5 of Chapter 111 of the General Laws as amended by Chapter 522 of the Acts of 1959, and by Chapter 172 of the Acts of 1960, in accordance with the procedure required by Chapter 30A of the General Laws, and after a public hearing held on May 20, 1960.

Filed with the Secretary of State on September 30, 1960.
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## ARTICLE I

### GENERAL APPLICATION AND ADMINISTRATION

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REGULATION 1. Scope of Application: Effective Date

1.1 This Sanitary Code shall apply throughout the Commonwealth unless and to the extent that the provisions of any article are expressly limited. This article shall be effective and have the force of law upon filing with the Secretary of State. Every other article shall be effective and have the force of law in accordance with the provisions of each. If an article fails to state a date from which it is to be effective, it shall become effective from the day following the date it is filed with the Secretary of State.

REGULATION 2. Local Rules and Regulations

2.1 Unless otherwise expressly provided in any other article, the legally designated health authority of any city, town, county, or other legally constituted governmental unit within the Commonwealth having the usual powers and duties of the board of health of a city or town and hereinafter called "board of health" may, as it considers necessary to promote and protect the health and well-being of the particular locality under its jurisdiction, adopt under its own legal power as exists in the General Laws any rules or regulations containing requirements stricter than those contained in this code. Nor should the existence of this code limit or otherwise affect the power of any health authority with respect to any matter for which this code makes no provision.

REGULATION 3. Inspection, Examination: Penalty

3.1 In order properly to carry out their respective responsibilities under this code and properly to protect the health and well-being of the people of the Commonwealth, the board of health and the Department of Public Health or the authorized agent or representative of either are authorized to enter, examine, or survey at any reasonable time such places as they consider necessary, and otherwise to conduct such examination or survey as it expressly provided in any other article.

Any person who willfully impedes or obstructs an inspection or examination by the board of health or the Commissioner of Public Health or the authorized agent or representative of either in the discharge of his official duties shall be fined not less than ten nor more than fifty dollars.

REGULATION 4. Methods of Enforcement by Local Boards of Health

4.1 Unless otherwise expressly provided in any other article, each board of health may enforce this code by fine in accordance with the penalty provisions of the article violated, or otherwise at law or in equity in the same manner that local rules and regulations are enforced. In addition, with respect to any article which provides
other means of enforcement, such means may also be used.

REGULATION 5. Emergency

5.1 Whenever an emergency exists which in the interest of protecting the public health requires that ordinary procedures be dispensed with, the board of health or its authorized agent, acting in accordance with the provisions of Section 30 of Chapter III of the General Laws, may, without notice or hearing, issue an order reciting the existence of the emergency and requiring that such action be taken as the board of health deems necessary to meet the emergency. Notwithstanding any other provision of this code, any person to whom such order is directed shall comply therewith within the time specified in the order. Each day's failure to comply with the order shall constitute a separate offense. Upon compliance with the order and within seven days after the day the order has been served he may file a written petition in the office of the board of health requesting a hearing. He shall be granted a hearing as soon as possible but not later than five days after the filing of the petition. The procedures for such hearing shall otherwise conform with the hearing requirement which would have existed had the order been issued under non-emergency circumstances.

5.2 No provision of this regulation shall be construed as a limitation on the emergency powers of the Department of Public Health of the Commonwealth.

REGULATION 6. Enforcement by Department of Public Health of the Commonwealth

6.1 If as a result of any study, inspection, or survey made under Regulation 3 of this article or under the provisions of any other article of this code the Commissioner of Public Health or his authorized representative determines that compliance with this code has not been effected, he shall, in writing, notify the appropriate board of health of such determination, allotting a reasonable time in which compliance shall be effected, and requesting that the board of health, in writing, notify the Commissioner of Public Health of what action it has taken, and what other action has been taken to effect compliance with this code. If the Commissioner is not so notified, or if after notification he determines that action sufficient to effect compliance with the provisions of this code has not been taken, the local board of health shall be deemed to have failed to effect compliance with this code.

6.2 Whenever any local board of health has failed after a reasonable length of time to enforce this code, the Commissioner of Public Health of the Commonwealth or his designated representative
may act for the Commonwealth in any way that the local board of health is authorized to act to effect compliance.

REGULATION 7. Partial Invalidity

7.1 If any article, regulation, paragraph, sentence, clause, phrase, or word of this code shall be declared invalid for any reason whatsoever, that decision shall not affect any other portion of this code, which shall remain in full force and effect; and to this end the provisions of this code are hereby declare severable.
COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC HEALTH

THE SANITARY CODE

ARTICLE II

Minimum Standards of Fitness for Human Habitation
Adopted by the Massachusetts Department of Public Health on September 13, 1960, in accordance with the provisions of Section 5 of Chapter 111 of the General Laws as amended by Chapter 522 of the Acts of 1959, and by Chapter 172 of the Acts of 1960, in accordance with the accepted standards of public health, sanitation, housing, and home safety practice, defining the responsibility of owners and tenants, and in accordance with the procedure required by Chapter 30A of the General Laws, and after a public hearing held on May 20, 1960.

These minimum standards of fitness for human habitation shall be effective throughout the Commonwealth on and after October 1, 1960, except that with respect to tents used for recreational purposes and to mobile homes they shall be effective on May 1, 1961.

Filed with the Secretary of State on September 30, 1960.
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## ARTICLE II

**MINIMUM STANDARDS OF FITNESS FOR HUMAN HABITATION**

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### PART II. ADMINISTRATION AND ENFORCEMENT

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PART I. SUBSTANTIVE PROVISIONS

REGULATION 1. Definitions

The following words and terms used in this article are defined as follows:

Dwelling means every building or shelter used or intended for human habitation and every other structure or condition located within the same lot line whose existence causes or is likely to effect non-compliance with the provisions of this article.

Dwelling unit means the room or group of rooms within a dwelling, or any dwelling used or intended for use by one family or household for living, sleeping, cooking, and eating.

Rooming unit means the room or group of rooms let to an individual or household for use as living and sleeping quarters but not for cooking, whether or not common facilities for cooking are made available; provided, that cooking facilities shall not be deemed common if they can be reached only by passing through any part of the dwelling unit or rooming unit of another.

Rooming house means every dwelling or part thereof which contains one or more rooming units in which space is let or sublet for compensation by the owner or operator to two or more persons not within the second degree of kindred to the person compensated. Boarding houses, hotels, inns, lodging homes, dormitories, and other similar dwelling places are included, except and to the extent that they are governed by stricter standards elsewhere created; provided, that the provisions of this article shall not apply to any hospital, sanatorium, convalescent or nursing home, infirmary or boarding house for the aged licensed by the Department of Public Health in accordance with the provisions of Chapter 111, Section 71, of the General Laws.

Habitable room means every room or enclosed floor space used or intended to be used for living, sleeping, cooking, or eating purposes, excluding bathrooms, toilet compartments, laundries, pantries, foyers, communicating corridors, closets, and storage spaces.

Owner means every person who alone or jointly or severally with others (a) has legal title to any dwelling or dwelling unit; or (b) has care, charge or control of any dwelling or dwelling unit as agent, executor, executrix, administrator, administratrix, trustee, or guardian of the estate of the holder of legal title. Each such person thus representing the holder of legal title is bound to comply with the provisions of these minimum standards as if he were the owner. Owner also means every person who operates a rooming house.
Occupant means every person over one year of age living or sleeping in a dwelling.

Person means every individual, partnership, corporation, firm, association, or group, including a city, town, county, or other governmental unit, owning property or carrying on an activity regulated by this article.

Board of Health means the appropriate and legally designated health authority of the city, town, county, or other legally constituted governmental unit within the Commonwealth having the usual powers and duties of the board of health of a city or town, or his or its authorized agent or representative.

Exterminate means to control and eliminate insects and rodents.

Garbage means the animal, vegetable, or other organic waste resulting from the handling, preparing, cooking, or consumption of food.

Rubbish means combustible and non-combustible waste material, except garbage, and includes but is not limited to such material as paper, rags, cartons, boxes, wood, excelsior, rubber, leather, tree branches, yard trimmings, grass clippings, tin cans, metals, mineral matter, glass, crockery, dust, and the residue from the burning of wood, coal, coke, and other combustible materials.

No person shall occupy as owner-occupant or let to another for occupancy any dwelling, dwelling unit, or rooming unit, for the purpose of living, sleeping, cooking, or eating therein, which does not comply with the following requirements:

REGULATION 2. Kitchen Facilities

2.1 The owner shall provide each dwelling unit with a kitchen sink. (See Regulations 5 and 9).

REGULATION 3. Bathroom Facilities

3.1 The owner shall provide no less than the following:

A. For each dwelling unit:
   a) one toilet
   b) one wash basin; and
   c) one shower or bathtub

Provided, that if the board of health of any city, town, or county determines that the requirements of one toilet, one wash basin, and one shower or bathtub for each dwelling unit would create an undue hardship in that city, town, or county, it may prior to the effective date of these minimum standards, file written notice thereof
with the Commissioner of Public Health of the Commonwealth stating a grace period of no longer than ten years from the effective date of these minimum standards, during which time in any dwelling constructed or under actual construction prior to the effective date of this article no more than eight occupants of more than one dwelling unit may share a single toilet, wash basin, and shower or bathtub. (See Regulations 3.2 and 39; see also Regulation 3.3).

B. For no more than eight occupants of rooming units and rooming houses who are not otherwise proved with these facilities:

a) one toilet
b) one wash basin, and
c) one shower or bathtub

Provided, that where more than one toilet is required in any toilet room, urinals may be substituted for up to 50 percent of the total number of toilets required, on the basis of one urinal substituted for one toilet.

3.2 The owner of any dwelling in which any toilet, wash basin, shower or bathtub is to be shared by the occupants of more than one dwelling unit or rooming unit is responsible for maintaining that toilet, wash basin, shower or bathtub in a clean and sanitary condition, including the cleaning of the fixture at least once every twenty-four hours.

3.3 No privy or chemical toilet shall be constructed or continued in use; provided, that the board of health may approve in writing the construction or continued use of any privy or chemical toilet which it determines will not (a) endanger the health of any person; or (b) cause objectionable odors or other undue annoyance. When so approved, a privy or chemical toilet may, subject to written authorization of the board of health, qualify as a toilet within the requirements of Regulations 3.1A. (See Regulation 39).

In no event may a privy be located within 30 feet of any building used for sleeping or eating, or of any lot line or street.

3.4 Except in the case of privies or chemical toilets approved by the board of health under the provisions of Regulation 3.3, or unless expressly authorized in any provision in any other article of this code, required bathroom facilities shall be accessible from within the building; they shall be so placed as not to require passing through any part of another dwelling unit or rooming unit; and toilets, showers, and bathtubs shall be separated from all other areas by walls or partitions which afford privacy. (See Regulations 5 and 9).

REGULATION 4. Water Supply

4.1 The owner shall provide for the occupant of every dwelling, dwelling unit, and rooming unit a supply of water sufficient in quantity
and pressure to meet the ordinary needs of the occupant, connected with
the public water supply system, or with any other source that the
board of health has determined does not endanger the health of any
potential user. (See Regulation 9).

REGULATION 5. Hot Water Facilities

5.1 The owner shall provide facilities capable of heating
water and shall also supply the water for use at a temperature of not
less than 120 degrees Fahrenheit, and in a quantity and pressure
sufficient to satisfy the ordinary use of each required kitchen sink,
wash basin, and shower or bathtub, unless and to the extent the
occupant is required to do so under a letting agreement.

REGULATION 6. Heating Facilities

6.1 The owner shall provide facilities for heating and shall
also supply heat in every habitable room, bathroom and toilet
compartment to a temperature of at least 70 degrees Fahrenheit during
such times of the year and of the day as conforms with local practice,
except and to the extent the occupant is required to do so under a
letting agreement. The temperature shall be read at a height of 3
feet above floor level at any point in the room more than 2 feet from
the inside of every exterior wall.

6.2 Notwithstanding any provisions of this regulation, for each
degree below 15 degrees below zero Fahrenheit that the temperature
falls, the requirement of 70 degrees may likewise be decreased.

6.3 Space heaters and water heaters, except electrical ones,
shall be properly vented to a chimney or duct leading to the outdoors.

REGULATION 7. Lighting and Electrical Facilities

7.1 The owner shall provide for each habitable room other than
a kitchen:

a) Transparent or translucent glass which admits the light
from the outdoors and which is equal in area to no less
than 10 percent of the entire floor area of that room;

b) Two separate wall-type convenience outlets, or one such
outlet and one electric light fixture. (See Regulation 9).

7.2 The owner shall provide for each kitchen:

a) One electric light fixture and one wall-type convenience
outlet; and

b) For each kitchen over 70 square feet, transparent, or
translucent glass which admits light from the outdoors and
which is equal in area to no less than 10 percent of the entire floor area of that kitchen.

7.3 The owner shall provide in each bathroom and toilet compartment an electric light fixture.

7.4 The owner shall provide and shall so locate electric light fixtures that illumination will be available for the safe and reasonable use of every laundry, pantry, foyer, community corridor, closet and storage space.

7.5 The owner shall at all times provide light in every part of all interior passageways, hallways, and stairways used or intended for use by the occupants of more than one dwelling unit or rooming unit so that the illumination, alone or in conjunction with natural lighting, shall be at least 2 lumens per square foot (2 foot candles).

7.6 The owner shall provide and shall so locate light fixtures that illumination will be available for the safe and reasonable use of all cellars, porches, and exterior stairways used or intended for use by the occupants.

7.7 No wiring shall lie under a rug or other floor covering, nor shall any extend through a doorway or other opening in a structural element. No temporary wiring shall be used or made available for use by any owner or occupant; provided, that extension cords which connect portable electric appliances or fixtures to convenience outlets shall not be considered temporary wiring.

7.8 If any light-obstructing structure is located less than 3 feet from the outside of and extends to a level above the lower level of the transparent or translucent glass required by this regulation, that portion so obstructed shall not be included as contributing to the required minimum total glass area.

7.9 The provisions of this regulation regarding the furnishing of electrical facilities shall apply only if a source of electricity is available from power lines within 600 feet of the dwelling.

REGULATION 8. Ventilation

8.1 The owner shall provide for each habitable room, bathroom, and toilet compartment, ventilation to the outdoors consisting of

A. Windows, skylights, doors, or transoms in the exterior walls or roofs that can be easily opened to a minimum of 4 percent of the floor area of that habitable room, bathroom, or toilet compartment of the dwelling to
direct rainfall shall not qualify; or

B. Mechanical ventilation capable of producing

a) For each kitchen, fifteen air changes per hour;
b) For each bathroom, or toilet compartment, twelve air changes per hour; and
c) For each habitable room other than a kitchen, ten air changes per hour. (See Regulation 9).

REGULATION 9. Installation and Maintenance of Facilities

. 9.1 Every required kitchen sink, wash basin, and shower or bathtub shall be connected to the hot and cold water lines of the water distribution system (See Regulation 4) and to a sanitary drainage system (See Regulation 16) in accordance with accepted plumbing standards.

9.2 Every provided toilet and wash basin shall be connected to the water distribution system (See Regulation 4) and to a sanitary drainage system (See Regulation 16) in accordance with accepted plumbing standards.

9.3 Unless and to the extent a letting agreement provides otherwise, the owner shall install in accordance with accepted plumbing, heating, gas-fitting, and electrical wiring standards, and maintain free from leaks, obstruction or other defects, all sinks, wash basins, bathtubs, showers, toilets, water-heating facilities, gas pipes, owner-installed dishwashers, and clothes-washing machines, catch basins, drains, vents, and all other similar supplied fixtures; their connections to the water, sewer, and gas lines; the subsurface disposal system, if any; all electric fixtures, outlets, and wiring; and all heating and ventilating equipment and appurtenances thereto.

9.4 Every occupant of a dwelling unit shall keep all toilets, wash basins, sinks, showers, and bathtubs in a clean and sanitary condition.

REGULATION 10. Curtailment of Service

10.1 No owner or occupant shall cause any service, facility, equipment, or utility which is required to be made available under these minimum standards to be removed from or shut off from any occupied dwelling except for such temporary period as may be necessary during actual repairs or alterations, or during temporary emergencies when curtailment of service is approved by the board of health. If any such service or facility that a person has agreed to supply by a letting agreement becomes curtailed, that person shall take immediate steps to cause its restoration.
REGULATION 11. Space and Use

11.1 Every dwelling unit shall contain at least 150 square feet of floor space for the first occupant, and at least 100 square feet of floor space for each additional occupant, the floor space to be calculated on the basis of total habitable room area.

11.2 In a dwelling unit, every room occupied for sleeping purposes by one occupant shall contain at least 70 square feet of floor space; every room occupied for sleeping purposes by more than one occupant shall contain at least 50 square feet of floor space for each occupant.

11.3 In a rooming unit, every room occupied for sleeping purposes of one occupant shall contain at least 80 square feet of floor space; every room occupied for sleeping purposes by more than one occupant shall contain at least 60 square feet of floor space for each occupant.

11.4 No room shall be considered habitable if more than three quarters of its floor-to-ceiling height is less than 7 feet.

11.5 In computing total floor area for the purpose of determining maximum permissible occupancy, that part of the floor area where the ceiling height is less than 5 feet shall not be considered.

11.6 No room or area in a dwelling may be used for sleeping if more than half of its floor-to-ceiling height is below the average grade of the adjoining ground. Provided, that any such room may be used for sleeping if it has been damp-proofed in accordance with any method approved in writing by the board of health. (See Regulation 39).

REGULATION 12. Exits

12.1 Every dwelling, dwelling unit, and rooming unit shall have as many means of exit as will allow for the safe passage of all people. No fewer than two acceptable exits from each dwelling unit and each floor of every rooming house shall satisfy this minimum requirement.

12.2 No person shall obstruct any exit or passageway. The owner is responsible for maintaining free from obstruction every exit used or intended for use by occupants of more than one dwelling unit or rooming unit. The occupant shall be responsible for maintaining free from obstruction all means of exit leading from his unit and not common to the exit of any other unit.

REGULATION 13. Installations and Maintenance of Structural Elements

13.1 Every owner shall install and maintain the foundation,
floors, walls, doors, windows, ceilings, roof, staircases, porches, chimneys, and other structural elements of his dwelling rodent-proof, watertight, and free from chronic dampness, weathertight, in good repair, and in every way fit for the use intended. Further, he shall maintain every interior structural element free from holes, cracks, loose plaster, or other defect which renders the area difficult to keep clean or which constitutes an accident hazard or insect or rodent harborage.

13.2 No paint that contains lead shall be used in painting the interior of any dwelling.

13.3 The owner shall provide a safe handrail and supporting banister or other protective devise for every stairway having a total rise of 30 inches or more which is used or intended for use by the occupants.

13.4 The owner shall provide a wall or protective railing at least 36 inches high for every porch, balcony, roof, or similar place which is more than 30 inches above the ground, and is used or intended for use by the occupants.

13.5 The floors of every bathroom, toilet compartment, and shower stall and the walls to a height of 48 inches of every bathroom and shower stall shall be constructed of nonabsorbent material which is easily cleanable.

REGULATION 14. Insects and Rodents

14.1 The occupant of each dwelling unit shall maintain the unit free from insects and rodents, and shall be responsible for exterminating them.

14.2 The owner of a dwelling shall maintain free from all insects and rodents, all hallways, passageways, and stairways used or intended for use by the occupants of more than one dwelling unit or rooming unit, and the premises of the dwelling, and he shall be responsible for exterminating all such pests in those common areas. Further, the owner shall be responsible for exterminating all such pests that exist in any dwelling unit if his improper maintenance of the dwelling allowed them to exist, or if they exist in two or more dwelling units of one dwelling.

14.3 The owner of a rooming house shall maintain it and its premises free from all insects and rodents, and shall be responsible for exterminating them.

14.4 Extermination shall be accomplished by eliminating the harborage places of insects and rodents, by removing or making inaccessible materials that may serve as their food or breeding ground, by poisoning, spraying, fumigating, trapping, or by any other
recognized and legal pest elimination method approved by the board of health.

REGULATION 15. Garbage and Rubbish Storage and Disposal

15.1 Garbage shall be stored in watertight receptacles of metal or other durable material with tight-fitting covers. Rubbish shall be stored in receptacles of metal or other durable material.

15.2 Unless and to the extent a letting agreement provides otherwise, the owner of any dwelling that contains three or more dwelling units, the owner of any rooming house, and the occupant of any other dwelling place shall be responsible for providing as many receptacles for the storage of garbage and rubbish as are sufficient to contain the accumulation before final collection or ultimate disposal, and shall so locate them that no objectionable odors enter any dwelling.

15.3 The occupant of each dwelling, dwelling unit, and rooming unit shall be responsible for the proper storage of his garbage and rubbish before final collection or ultimate disposal.

15.4 The owner of any dwelling that contains three or more dwelling units, the owner of any rooming house, and the occupant of any other dwelling place shall be responsible for the final collection or ultimate disposal or incineration of garbage and rubbish by means of

a) The regular municipal collection system; or
b) Any other collection system approved by the board of health; or
c) When otherwise lawful, a garbage grinder which grinds garbage into the kitchen sink drain finely enough to ensure its free passage and is otherwise maintained in a sanitary condition; or
d) When otherwise lawful, a garbage or rubbish incinerator located within the dwelling which is properly installed and which is maintained so as not to create a safety or health hazard; or
e) Any other method of disposal which does not endanger any person and which is approved in writing by the board of health. (See Regulation 39).

REGULATION 16. Sewage Disposal

16.1 The owner shall provide each dwelling with a sanitary drainage system connected to the public sewerage system; provided, that if, because of distance or ground conditions, connection to a public sewerage system is not practicable, the owner shall provide, and shall maintain in a sanitary condition, any other means of sewage disposal which is in compliance with Article XI of this code. (See
Regulation 39.)

REGULATION 17. Temporary Housing

17.1 No tent, mobile dwelling unit, or other structure used for human habitation which is located on a lot or tract of land for less than thirty consecutive days may be used except with the written permission of the board of health.

17.2 All such temporary housing shall be subject to the requirements of these minimum standards, except as the board of health may provide in its written permission. (See Regulation 39).

REGULATION 18. Inapplicability of Article

18.1 The provisions of this article shall not comply to any dwelling which

a) Is located on a camp-ground or site and is being operated with the written approval of the board of health; or

b) Is otherwise required to conform with standards of fitness for human habitation elsewhere existing in this code; or

c) Is used exclusively as a civil defense shelter.

PART II. ADMINISTRATION AND ENFORCEMENT

REGULATION 31. General Administration

31.1 The provisions of Article I of this code shall govern the administration and enforcement of these minimum standards except as supplemented by the following regulations.

REGULATION 32. Access for Repairs and Alterations

32.1 Every occupant of a dwelling, dwelling unit, or rooming unit shall give thereof, or his agent or employee, access to the dwelling, dwelling unit, or rooming unit at all reasonable times for the purpose of making such repairs or alterations as are necessary to effect compliance with the provisions of these minimum standards.

REGULATION 33. Orders; Service and Content

33.1 If an examination as provided for in Regulation 3 of Article I of this code reveals that a dwelling does not comply with the provisions of this article, the board of health may order the owner or occupant, as appropriate, to
a) Clean the premises; or

b) Otherwise comply with the violated provisions of this article.

33.2 If an examination as provided for in Regulation 3 of Article I of this code reveals that a dwelling so fails to comply with the provisions of this article as to endanger or materially impair the health or well-being of the occupant or the public, the board of health may order the dwelling condemned and vacated if occupied, and demolished, if necessary.

33.3 Every order authorized by this article shall be in writing. Orders issued under the provision of Regulation 33.1 shall be served on the persons responsible for the violated regulations. Orders issued under the provisions of Regulation 33.2 shall be served on the owner or his authorized agent. All orders shall be served on the designated person.

a) Personally, by any person authorized to serve civil process; or

b) By leaving a copy of the order at his last and usual place of abode; or

c) By sending him a copy of the order by registered or certified mail, return receipt requested, if he is within the Commonwealth; or

d) If his last and usual place of abode is unknown or outside the Commonwealth, by posting a copy of the order in a conspicuous on or about the dwelling or portion thereof affected.

A copy of every order issued under the provisions of Regulation 33.2 shall also be served upon every mortgagee of record by sending it registered mail, return receipt requested, in every case where demolition action is contemplated.

33.4 Subject to the emergency provision of Regulation 5 of Article I of this code, any order issued under the provisions of this article shall:

a) Include a statement of the violation or defect, and may suggest action which if taken will effect compliance with this code;

b) Allot a reasonable time for any action it requires; and

c) Inform the person to whom it is directed of his right to
a hearing, and of his responsibility to request the hearing; and to whom the request shall be made.

REGULATION 34. Hearing

34.1 The person or persons to whom any order served pursuant to Regulation 33 of this article has been directed may request a hearing before the board of health by filing within seven days after the day the order was served in the office of the board of health a written petition requesting a hearing on the matter. Upon receipt of such petition the board of health shall set a time and a place for such hearing and shall inform the petitioner thereof in writing. The hearing shall be commenced not later than ten days after the petition was filed; provided, that upon application of the petitioner the board of health may postpone the date of the hearing for a reasonable time beyond such ten-day period if in the judgment of the board of health the petitioner has submitted a good and sufficient reason for such postponement.

34.2 At the hearing the petitioner shall be given an opportunity to be heard and to show why the order should be modified or withdrawn. Where appropriate, a consolidated hearing may be held.

34.3 After the hearing the board of health shall sustain, modify, or withdraw the order and shall inform the petitioner in writing of its decision. If the board of health sustains or modifies the order, it shall be carried out within the time period allotted in the original order or in the modification.

34.4 Every notice, order, or other record prepared by the board of health in connection with the hearing shall be entered as a matter of public record in the office of the board of health.

34.5 Any person aggrieved by the decision of the board of health may seek relief therefrom in any court of competent jurisdiction, as provided by the laws of this Commonwealth.

34.6 If a written petition for a hearing is not filed in the office of the board of health within seven days after an order as provided in Regulation 33 has been issued, or if after a hearing the order has been sustained in any part, each day's failure to comply with the order as issued or modified shall constitute an additional offense. (See Regulation 37).

REGULATION 35. Placarding of Condemned Dwellings; Removal of Occupants; Demolition

35.1 If a written petition for a hearing is not filed in the office of the board of health within seven days after an order of condemnation of any dwelling or portion thereof has been issued, or if after a hearing the order of condemnation of a dwelling or portion
thereof has been sustained in any part, the dwelling or portion thereof so affected by the order as issued or as so sustained shall be placarded by the board of health.

35.2 No dwelling or portion thereof which has been condemned and placarded as unfit for human habitation shall again be used for human habitation until written approval is secured from, and such placard is removed by, the board of health. No person shall deface or remove the placard, except that the board of health shall remove it whenever the defect or defects upon which the condemnation and placarding action were based have been eliminated.

35.3 If any person refuses to leave a dwelling or portion thereof which has been ordered condemned and has been placarded in accordance with Regulation 33 and 35, he may be forcibly removed by the board of health, or by local police authorities, on request of the board of health.

35.4 The board of health may undertake to demolish any dwelling an order for whose destruction was properly served on the owner and every mortgagee of record in accordance with the requirements of notice and hearing in Regulations 33.2 through 35, and a claim for the expense incurred by said board in so doing shall constitute a debt due the city or town upon the completion of the work and the rendering of an account therefor to the owner of such structure, and shall be recoverable from such owner in an action of contract. Said debt, together with interest thereon at the rate of 6 percent per annum from the date said debt becomes due, shall constitute a lien on the land upon which the structure was located if a statement of claim, signed by the board of health, setting forth the amount claimed without interest is filed, within ninety days after the debt becomes due, with the register of deeds for record or registration, as the case may be, in the county or in the district, if the county is divided into districts, where the land lies. Such lien shall take effect upon the filing of the statement aforesaid and shall continue for two years from the first day of October next following the date of such filing. Such lien may be dissolved by filing with the register of deeds for record or registration, as the case may be, in the county or in the district, if the county is divided into districts, where the land lies, a certificate from the collector of the city or town that the debt for which such lien attached, together with interest and costs thereon, has been paid or legally abated. Such collector shall have the same powers and be subject to the same duties with respect to such claim as in the case of the annual taxes upon real estate; and the provisions of law relative to the collection of such annual taxes; and the sale or taking of land for the non-payment thereof, and the redemption of land so sold or taken shall apply to such claim.

REGULATION 36. Cleaning or Repairing by the Board of Health; Expenses
36.1 If a failure to comply with an order requiring that any dwelling or its premises be properly cleaned or repaired results in a condition which endangers or materially impairs the health or well-being of the occupant or the public, the board of health may cause such proper cleaning or repair and charge the responsible person or persons as hereinbefore provided with any and all expenses incurred. Any such charges by the board of health shall not absolve the responsible person or persons from any penalty warranted by the failure to comply with the order.

36.2 The board of health may also act in an emergency under the provisions of Regulation 5 of Article I of this code to clean or repair any dwelling which so fails to comply with the provisions of this article as to endanger or materially impair the health or well-being of the occupant or the public, and to charge the responsible person or persons with any and all expenses incurred.

REGULATION 37. Penalties

37.1 Any person who shall violate any provision of these minimum standards for which a penalty is not otherwise provided in any of the General Laws or in other provisions of this article or Article I of this code, shall upon conviction be fined not less than ten nor more than fifty dollars.

37.2 Any person who shall fail to comply with any order issued pursuant to the provisions of this article shall upon conviction be fined not less than ten nor more than fifty dollars. Each day's failure to comply with an order shall constitute a separate violation. (See Regulation 34.6).

REGULATION 38. Variance

38.1 The board of health may vary the application of any provision of this article with respect to any particular case when, in its opinion, the enforcement thereof would do manifest injustice, provided, that the decision of the board of health shall not conflict with the spirit of these minimum standards. Any variance granted by the board of health shall be in writing. A copy of any such variance shall, while it is in effect, be available to the public at all reasonable hours in the office of the clerk of the city or town, or in the office of the board of health, and notice of the grant of variance shall be filed with the Commissioner of Public Health of the Commonwealth.

REGULATION 39. Variance, Grant of Special Permission; Expiration, Modification, Suspension of

39.1 Any variance or other modification authorized to be made by this article may be subject to such qualification, revocation, suspension, or expiration as the board of health expresses in its grant.
A variance or other modification authorized to be made by this article may otherwise be revoked, modified, or suspended, in whole or in part, only after the holder thereof has been notified in writing and has been given an opportunity to be heard, in conformity with the requirements of an order and hearing of Regulations 33 and 34 of this article.