

## NATIONAL ORGANIZATION SONS OF UNION VETERANS OF THE CIVIL WAR CIVIL WAR MEMORIAL ASSESSMENT FORM

**Type of Memorial (check all applicable)**

Monument  with Sculpture  without Sculpture  with Cannon  standalone Cannon  
 Historical Marker  Plaque  Other ( flag pole, G.A.R. buildings, stained glass windows, etc.)

**Affiliation**

GAR  MOLLUS  SUVCW  WRC  ASUVCW  
 LGAR  DUVCW  Other

If known, record name and number of post, camp, corps, auxiliary, tent, circle or appropriate information of other groups:

Unknown

**Original Dedication Date** \_\_\_\_\_ Please consult any/all newspaper archives for a local paper's article that would have information on the *first* dedication ceremony and/or other facts on the memorial. Please submit a copy of your findings with full identification of the paper & date of publication. Thank you.

**Location**

The Memorial is *currently* located at:

Street/Road address or site location Montgomery County Courthouse  
100 E Main St GPS Coordinates N 40° 02.510 W 086° 54.066

City/Village &/or Township Crawfordsville  
 County Montgomery State IN Zip Code 47933

The front of the Memorial faces:  North  South  East  West

**Government Body, Agency, or Individual Owner**

Name Montgomery County Courthouse  
 Dept./Div. \_\_\_\_\_  
 Street Address 100 E Main  
 City Crawfordsville State IN Zip Code 47933  
 Contact Person \_\_\_\_\_ Telephone ( 765 ) 364-6400 ext \_\_\_\_\_

Is Memorial on the National Register of Historic Places  Yes  No ID # if known UNKNOWN

**For Monuments with/without sculpture:**

**Physical Details**

Material of Monument or base under a Sculpture or Cannon =  Stone  Concrete  Metal  Other  
 If known, name specific material (color of granite, marble, etc.) \_\_\_\_\_

Material of the Sculpture  Stone  Concrete  Metal  Other Is it hollow or solid? \_\_\_\_\_  
 If known, name specific material (color of granite, marble, etc.) \_\_\_\_\_

**For Historic Marker or Plaque:**

Material of Plaque or Historical Marker / Tablet = N/A

**For Cannons with/without monument:**

Material of Cannon =      Bronze  Iron Type of Cannon (if known) 6 pounder

Rifled      YES  NO

Markings: Muzzle 177(?) and 'J' Base Ring/Breech n/a

Left Trunion 1847 Right Trunion C A & Co [Cyrus Alger] Boston

Is inert ammunition a part of the Memorial?      Yes  No

[For camp/department monuments officer's use: Cannon on list of known ordnance]      Yes      No

**For Other Memorials:** (flag pole, G.A.R. buildings, stained glass windows, etc.)

What best describes the memorial N/A

Materials of the Memorial

**Complete for All Memorials**

**Approximate Dimensions** (indicate unit of measure) - taken from tallest / widest points

     Height      Width      Depth or      Diameter

For Memorials with multiple Sculptures, please record this information on a separate sheet of paper for each statue (service, pose, etc) and attach to this form. Please describe the "pose" of each statue and any weapons/implements involved (in case your photos become separated from this form). Thank you!

**Markings/Inscriptions** (on stone-work / metal-work of monument, base, sculpture)

Maker or Fabricator mark / name? If so, give name & location found

Please attach legible photographs of all text &/or Record the text in the space below. Please use the addendum – narrative sheet if necessary.

**Environmental Setting**

(The general vicinity and immediate locale surrounding a memorial can play a major role in its overall condition.)

**Type of Location**

Cemetery       Park       Plaza/Courtyard       "Town Square"       Post Office  
 School       Municipal Building       State Capitol       Courthouse       College Campus  
 Traffic Circle       Library      Other: \_\_\_\_\_

**General Vicinity**

Rural (low population, open land)       Suburban (residential, near city)       Town       Urban / Metropolitan

**Immediate Locale** (check as many as may apply)

Industrial       Commercial       Street/Roadside within 20 feet       Tree Covered (overhanging branches)  
 Protected from the elements (canopy or enclosure, indoors)       Protected from the public (fence or other barrier)

Any other significant environmental factor \_\_\_\_\_

[To detail the condition of a monument used the addendum form for *Monument's Condition*]

**Supplemental Background Information**

In addition to your on-site survey, any additional information you can provide on the described Memorial will be welcomed. Please label each account with its source (author, title, publisher, date, pages). Topics include any reference to the points listed on this questionnaire, plus any previous conservation treatments - or efforts to raise money for treatment.

Addendums attached to this electronic file are the *Monument's Condition* and the *Narrative* forms. Only the *Monument's Condition* form is required if you are requesting grant money using form CWM-62 *SUVCW Memorial Grant Application Form and Instructions*.


Thank you.

Inspector Identification \_\_\_\_\_ Date of On-site Survey 08/04/2017  
 Your Name Walt Busch  
 Address 1240 Konert Valley Dr  
 City Fenton State MO Zip Code 63026  
 Telephone (                      ) E-Mail wbusch@suvchwmo.org

Are you a member of the Allied Orders of the G.A.R.? If so, which one?

SUVCW US Grant Camp 68, MO

Please send this completed form to:

Walt Busch, PDC, Chair  
 1240 Konert Valley Dr.  
 Fenton, MO 63026  


Thank you for your help, and attention to detail.

**SONS OF UNION VETERANS OF THE CIVIL WAR – CIVIL WAR MEMORIALS COMMITTEE.**

Crawfordsville Cannon(s) N40;2;30.3999999 W86;54;365999999 Altitude 230.2567049



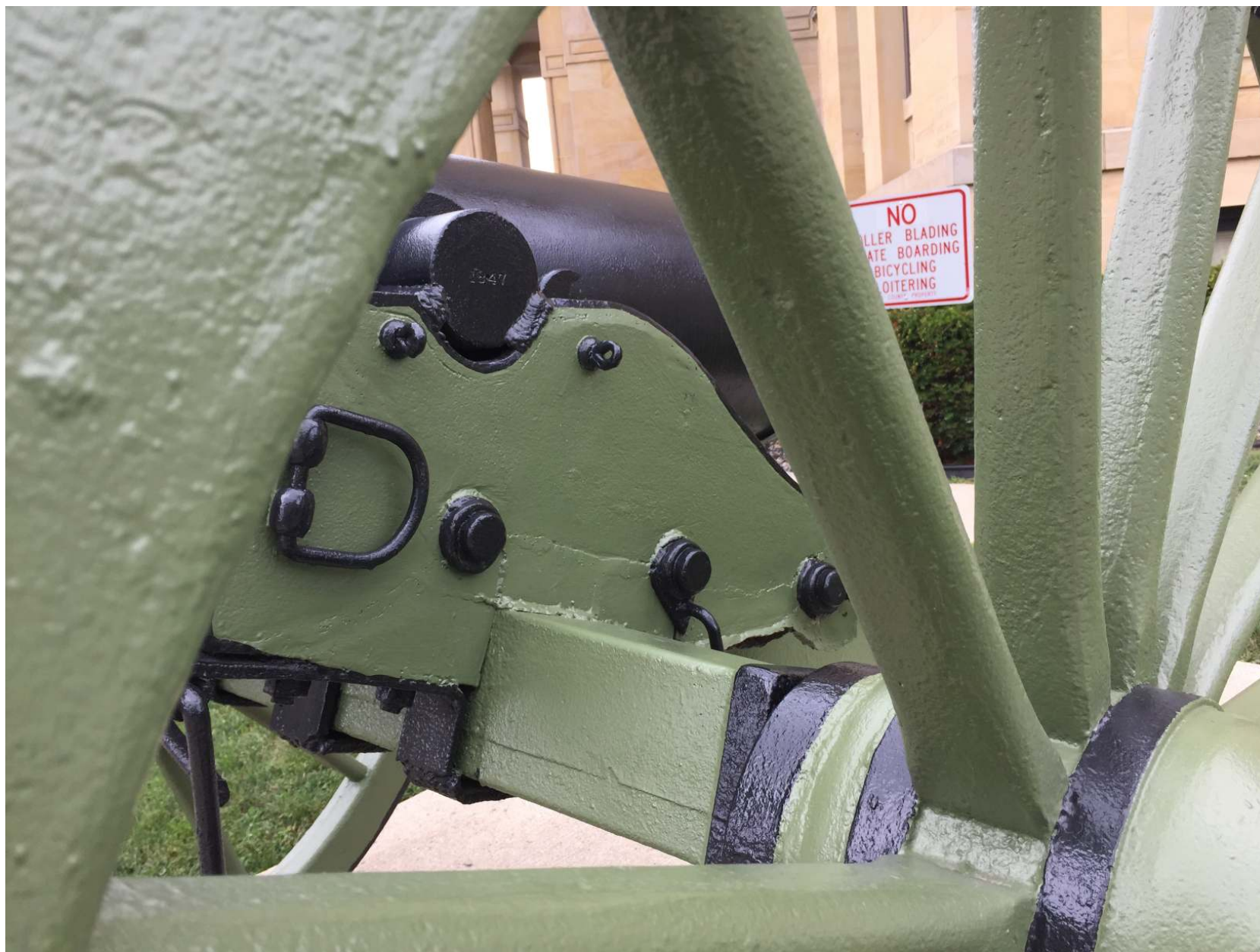


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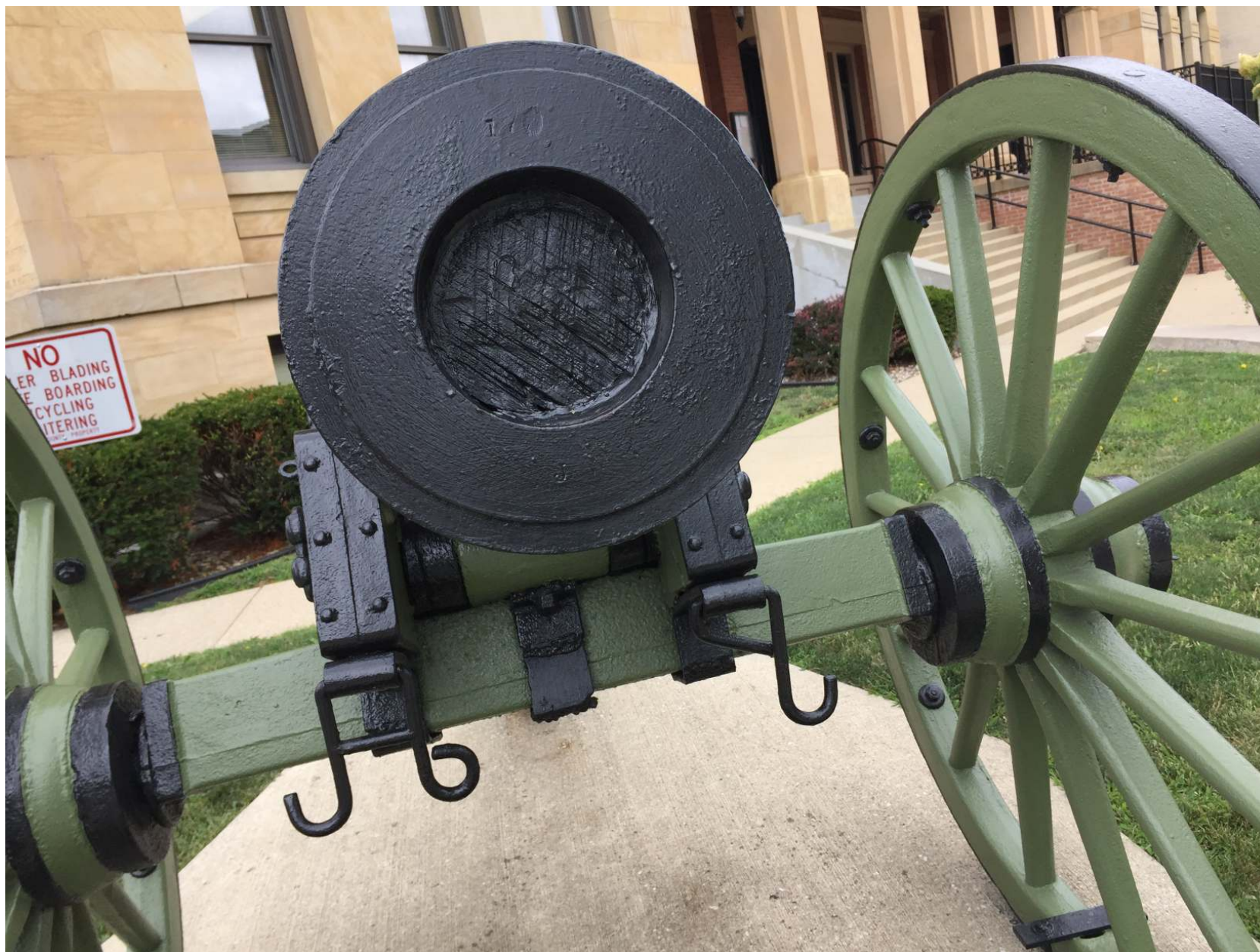


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