## NATIONAL ORGANIZATION SONS OF UNION VETERANS OF THE CIVIL WAR

## CIVIL WAR MEMORIAL ASSESSMENT FORM

## PLEASE:

- 1. Type or print, using a ball-point pen, when filling out this form. Legibility is critical.
- 2. Do not guess at the information. An answer of, "Unknown," is more helpful. .Include a photograph of each viewable side and label it with name & direction of view.

- Thank You.

| Type of Memorial   |   |  |  |
|--|---|--|--|
| X Monument with Sculpture  | Monument with Cannon  |  |  |
| Monument without Sculpture   | Historical Marker Plaque  |  |  |
| Other ( flag pole, G.A.R. buildings, stained glas  | ss windows, etc.)   |  |  |
| Affiliation  |   |  |  |
| G.A.R. (Post Name & No   | )M.O.L.L.U.S  |  |  |
| SUVCW (Camp Name & No  | (Please describe below)   |  |  |
| WRC (Corps Name & No   |   |  |  |
| ASUVCW (Aux Name & No  |   |  |  |
| DUVCW (Tent Name & No  |   |  |  |
| LGAR (Circle Name & No   |   |  |  |
| Other  |   |  |  |
| article that would have information on the <i>first</i> dedication cerer your findings with full identification of the paper & date of publi <b>Location</b> | Please consult any/all newspaper archives for a local paper's mony and/or other facts on the memorial. Please submit a copy or cation. Thank you. |  |  |
| The Memorial is <i>currently</i> located at:   |   |  |  |
| Street/Road address or site location Cambridge Ceme  | rery .  |  |  |
| City/Village Cambridge Township  | County Dorchester   |  |  |
| State Maryland .   |   |  |  |
| The front of the Memorial faces: North S   | outh East West  |  |  |
| Government Body, Agency, or Individual Owner (of p   | private cemetery that Memorial is located in)   |  |  |
| Dept./Div  |   |  |  |
| Street AddressStateTelephone ( )   | City  |  |  |
| State  | Zip Code Contact Person   |  |  |
| Telephone ( )  |   |  |  |
| If the Memorial has been moved, please list form   |   |  |  |
|  |   |  |  |
|  |   |  |  |

## **Physical Details**

| Material of the Sculpture = X StoneConcrete Metal Undetermined   If known, name specific material (color of granite, marble, etc.)   If the Sculpture is of metal, is it solid cast or "hollow?"   | Material of Monument or base under a Sculpture or C name specific material (color of granite, mar |   | ete Metal Undetermined If known,   |
|--|---|---|--|
| If known, name specific material (color of granite, marble, etc.) Marble  If the Sculpture is of metal, is it solid cast or "hollow?"  Material of Plaque or Historical Marker / Tablet = Bronze  Material of Cannon =BronzeIron - Consult known Ordnance Listing to confirm  Markings on muzzle =Markings on Left Trunion Right Trunion  Is inert ammunition a part of the Memorial? If so, describe  Approximate Dimensions (indicate unit of measure) - taken from tallest / widest points  Monument or Base: Height 8° Width 4' Depth 4' or Diameter  Sculpture: Height 7 Width 3 Depth 2' or Diameter  For Memorials with multiple Sculptures, please record this information on a separate sheet of paper for each statue 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  The "Dedication Text" is formed: X cut into material raised up from material face  Record the text (indicate any separation if on different sides) Please use additional sheet if necessary.  This monument erected by the Salae in 1868, honors Thom. Holt. Hicks, a native and life resident of Dorchester Co | SUVCW - CIVIL WAR   |   |  |
| Material of Cannon =BronzeIron - Consult known Ordnance Listing to confirm  Markings on muzzle =   | If known, name specific material (color of gr   | anite, marble, etc.) Marble             |  |
| Markings on Left Trunion   | Material of Plaque or Historical Marker / Ta  | ablet = Bronze                          |  |
| Approximate Dimensions (indicate unit of measure) - taken from tallest / widest points  Monument or Base: Height 68" Width 4' Depth 4' or Diameter   | Markings on muzzle =  |   |  |
| Approximate Dimensions (indicate unit of measure) - taken from tallest / widest points  Monument or Base: Height 68"   | Markings on Left Trunion  | Right Trunion                           |  |
| Monument or Base: Height 68 Width 4 Depth 4 or Diameter or Diameter Sculpture: Height 7 Width 3 Depth 2 or Diameter or Diameter or Diameter    For Memorials with multiple Sculptures, please record this information on a separate sheet of paper for each statue 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  | Is inert ammunition a part of the Memorial  | ? If so, describe _                     |  |
| Monument or Base: Height 68 Width 4 Depth 4 or Diameter or Diameter Sculpture: Height 7 Width 3 Depth 2 or Diameter or Diameter or Diameter    For Memorials with multiple Sculptures, please record this information on a separate sheet of paper for each statue 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  |   |   |  |
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| for each statue 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  The "Dedication Text" is formed: X cut into material raised up from material face  Record the text (indicate any separation if on different sides) Please use additional sheet if necessary. "This monument erected by the Satae in 1868, honors Thom. Holl. Hicks, a native and life resident of Dorchester Co.  Late in 1860 and early 1861 as Md.'s first Civil War governor he opposed the doctrine of secession and of coercion.  In furtherance of his policy and resisting great pressure he refused for five months to call the legislation in special sessition.  During the War he supported the Union."  Md. Civil War Centennial Commission.  Environmental Setting  (The general vicinity and immediate locale surrounding a memorial can play a major role in its overall condition.)  Type of Location  X Cermetery Park Plaza/Courtyard Town Square" Post Office School School Municipal Building State Capitol Other: College Campus  | Sculpture: Height 7' Width 3' I   | Depth <u>2'</u> or Diame                | ter  |
| Record the text (indicate any separation if on different sides) Please use additional sheet if necessary.  "This monument erected by the Satae in 1868, honors Thom. Holl. Hicks, a native and life resident of Dorchester Co.  Late in 1860 and early 1861 as Md.'s first Civil War governor he opposed the doctrine of secession and of coercion.  In furtherance of his policy and resisting great pressure he refused for five months to call the legislation in special sesstion.  During the War he supported the Union."  Md. Civil War Centennial Commission.  Environmental Setting  (The general vicinity and immediate locale surrounding a memorial can play a major role in its overall condition.)  Type of Location  X Cemetery Park Plaza/Courtyard  "Town Square" Post Office School  Municipal Building State Capitol  Courthouse College Campus   | weapons/implements involved (in case your Markings/Inscriptions (on stone-work / n                | ur photos become sepai                  | rated from this form). Thank you! , base, sculpture)   |
| This monument erected by the Satae in 1868, honors Thom. Holl. Hicks, a native and life resident of Dorchester Co.  Late in 1860 and early 1861 as Md.'s first Civil War governor he opposed the doctrine of secession and of coercion.  In furtherance of his policy and resisting great pressure he refused for five months to call the legislation in special sesstion.  During the War he supported the Union."  Md. Civil War Centennial Commission.  Environmental Setting  (The general vicinity and immediate locale surrounding a memorial can play a major role in its overall condition.)  Type of Location  X Cemetery Park Plaza/Courtyard  "Town Square" Post Office School  Municipal Building State Capitol Other:  Courthouse College Campus  | The "Dedication Text" is formed: X cut in   | nto material raised u                   | up from material fące  |
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| Type of Location  X Cemetery Park Plaza/Courtyard School Municipal Building Courthouse College Campus  | Md. Civil War Centennial Commission.  |   |  |
| Town Square Post Office School  Municipal Building State Capitol Other:  Courthouse College Campus   | (The general vicinity and immediate locale surroundin   | g a memorial can play a major           | role in its overall condition.)  |
| Town Square Post Office School  Municipal Building State Capitol Other:  Courthouse College Campus   |   |   | D. 10 1  |
| Municipal Building State Capitol Other: Courthouse College Campus  | <del></del>   | <del></del>                             |  |
| Courthouse College Campus  |   |   |  |
| <del></del>  | <del></del> · · · ·   | •                                       | Otner:   |
| I ramic Circle Library   | <del></del>   |   |  |
|  | Hailic Circle   | Library                                 |  |

Does water collect in recessed areas of the Memorial? X Yes No Unable to tell

| If known, identify type of coating.  GildedPaintedVarnished WaxedUnable to determine Is the coating in good condition? Yes No _x Unable to determine  Basic Surface Condition Assessment (check one)  In your opinion, what is the general appearance or condition of the Memorial? Well maintained Would benefit from treatment In urgent need of treatment Unable to determine  Overall Description  Briefly describe the Memorial (affiliation / overall condition & any concern not already touched on) .  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. Thank you.  Inspector Identification  Date of On-site Survey | Surface Coating  |
|--|--|
| In your opinion, what is the general appearance or condition of the Memorial?well maintainedwould benefit from treatment X _ In urgent need of treatmentUnable to determine  Overall Description  Briefly describe the Memorial (affiliation / overall condition & any concern not already touched on) .  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. Thank you.  Inspector Identification  Date of On-site Survey 8/12  Your Name J Eric Drummer  Address 237 Brookwood Ave  | Does there appear to be a coating? Yes × No Unable to determine  If known, identify type of coating Gilded Painted Varnished Waxed Unable to determine  Is the coating in good condition? Yes No × Unable to determine   |
| Would benefit from treatment X In urgent need of treatment Unable to determine  Overall Description  Briefly describe the Memorial (affiliation / overall condition & any concern not already touched on)  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. Thank you.  Inspector Identification  Date of On-site Survey 8/12  Your Name J Eric Drummer  Address 237 Brookwood Ave. City Easton  State MD Zip Code 21601 Telephone ( What Order or Organization is submitter a member of? SUVCW Dept. Chesapeake, Camp 25  Please send this completed form to  | Basic Surface Condition Assessment (check one)   |
| Briefly describe the Memorial (affiliation / overall condition & any concern not already touched on).  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. Thank you.  Inspector Identification  Date of On-site Survey 8/12  Your Name J Eric Drummer  Address 237 Brookwood Ave. City Easton  State MD Zip Code 21601 Telephone ( What Order or Organization is submitter a member of? SUVCW Dept. Chesapeake, Camp 25  | In your opinion, what is the general appearance or condition of the Memorial? Well maintained Would benefit from treatment X_ In urgent need of treatment Unable to determine  |
| 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. Thank you.  Inspector Identification  Date of On-site Survey 8/12  Your Name J Eric Drummer  Address 237 Brookwood Ave. City Easton  State MD Zip Code 21601 Telephone ( What Order or Organization is submitter a member of? SUVCW Dept. Chesapeake, Camp 25  Please send this completed form to   | Overall Description  |
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|  | What Order or Organization is submitter a member of? SUVCW Dept. Chesapeake, Camp 25   |
| Walt Busch, PDC, Chair   | Please send this completed form to   |
|  | Walt Busch, PDC, Chair   |
|  |  |
|  |  |

Thank you for your help, and attention to detail. Sons of Union V

CIVIL WAR VETERANS OF THE National Civil War Memorials Committee