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, stain	ed 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: Cotton Highway Assoc

Original Dedication Date Unknown before 2010 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 <i>currently</i> located at:	i Londing				
Street/Road address or site location San Souc AR-198 at Mississippi River N35.6540075 W89.9543841	GPS Coordinates N3	GPS Coordinates N35° 39'17.57000 W89° 55'31.049999			
City/Village &/or Township Osceola					
County Mississippi	State Arkansas	Zip Code 72370			
The front of the Memorial faces: North	South <u>✓</u> East	West			
Government Body, Agency, or Individual	l Owner				
Name San Souci Landing					
Dept./Div.					
Street Address AR-198 at Mississippi River					
City Osceola	State <u>^R</u>	Zip Code <u>72370</u>			
Contact Person	Telephone (870) <u>563-</u>	-2281 ext			
Is Memorial on the National Register of Hist	toric PlacesYes	_No ID # if known			
For Monuments with/without sculpture:					
•					
Physical Details		Million Oller			
Material of Monument or base under a Sculpture or 0					
If known, name specific material (color of granite, ma	arbie, etc.)				
Material of the SculptureStoneConcre	te Metal 🗸 Other	Is it hollow or solid?			
If known, name specific material (color of granite, ma					

>This form may be photocopied.<

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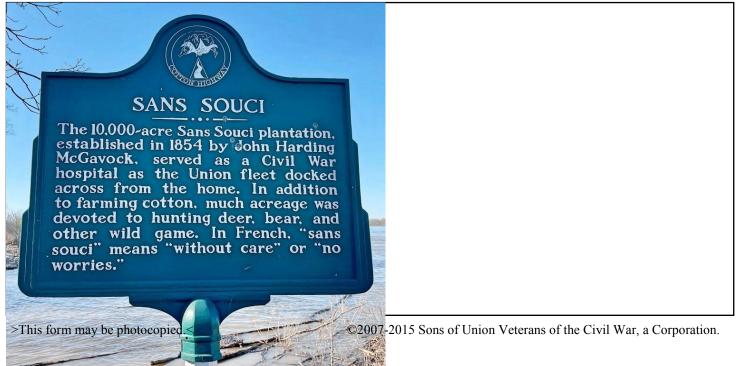
FORM CWM								Page 2
For Hist	oric Marker or Pla							
Material of	Plaque or Historical M	arker / Tablet	=					
For Can	nons with/without	monumen	t:					
Material of	Cannon = Bron	zeIron	Type of Ca	nnon (if known)			YES _	NO
Markings:	Muzzle			Base Ring/Breech	<u>ו</u>			
Left Trunic	n munition a part of the N			_ Right Trunion				
Is inert am	munition a part of the N	Memorial?	Yes	_ No				
[For camp	department monumen	ts officer's use	: Cannon on	list of known ordna	ance]	Yes	_No	
For Othe	er Memorials: (flag	pole, G.A.R.	buildings, s	tained glass wind	dows, etc.)			
What bes	t describes the mem	orial						
Materials	of the Memorial							
-	ete for All Memorate Dimensions	orials						
8 feet	Height <u>^{3 feet}</u>	Widtl	h ^{8 inches}	Depth or		Diamete	er	
	ials with multiple Sculptur to this form. Please desci							

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 School Traffic Circle	 ✓ Park Municipal Building Library 	Plaza/Courtyard State Capitol Other:	"Town Square" Courthouse	Post Office College Campus	
General Vicinity Rural (low population, open land) Suburban (residential, near city) Town Urban / Metropolitan					
Immediate Locale (check as many as may apply) Industrial <u>·</u> Commercial <u>·</u> 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	06/09/2018
Your Name Walter E Busch		
Address 1240 Konert Valley Dr		
City Fenton	State MO	Zip Code 63026
Telephone (

Are you a member of the Allied Orders of the G.A.R.? If so, which one? MO - US Grant Camp 68

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.