

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

**PLEASE:**

- Type or print, using a ball-point pen, when filling out this form. Legibility is critical.
- 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**

Monument *with* Sculpture  Monument with *Cannon*  
 Monument *without* Sculpture  Historical Marker  Plaque

**Affiliation**

G.A.R. (Post Name & No. Theodore Winthrop Post 35)  M.O.L.L.U.S.  
 W.R.C. (Corps Name & No. \_\_\_\_\_)  Other Allied Order  
 SUVCW (Camp Name & No. \_\_\_\_\_) (Please describe below)  
 DUVCW (Tent Name & No. \_\_\_\_\_)  
 Other: \_\_\_\_\_

**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 Woodlawn Cemetery, 302 Elm St.  
 City/Village Chelsea Township \_\_\_\_\_ County Suffolk  
Everett

The front of the Memorial faces:  North  South  East  West

**Government Body, Agency, or Individual Owner** (of private cemetery that Memorial is located in)...

Name City of Chelsea Dept./Div. \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Contact Person \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

If the Memorial has been moved, please list former location(s)...

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Physical Details**

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

Material of the Sculpture = \_\_\_ Stone \_\_\_ Concrete  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 Plaque or Historical Marker / Tablet = \_\_\_\_\_

Material of Cannon = \_\_\_ Bronze \_\_\_ Iron - 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 2' Width 8 Depth 8 or Diameter \_\_\_\_\_  
 Sculpture: Height 18' Width \_\_\_\_\_ Depth \_\_\_\_\_ 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:  cut into material \_\_\_ raised up from material face

Record the text (indicate any separation if on different sides...) Please use additional sheet if necessary.

ERECTED BY  
THEODORE WINTHROP POST. 35. G.A.R.

**Environmental Setting**

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

**Type of Location**

- |  |                    |                     |
|--|--------------------|---------------------|
| <input checked="" type="checkbox"/> Cemetery | ___ Park           | ___ Plaza/Courtyard |
| ___ "Town Square"                            | ___ Post Office    | ___ School          |
| ___ Municipal Building                       | ___ State Capitol  | Other: _____        |
| ___ Courthouse                               | ___ College Campus | _____               |
| ___ Traffic Circle                           | ___ Library        | _____               |

**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 \_\_\_\_\_

**Condition Information**

**Structural Condition** (check as many as may apply)

The following section applies to Monuments *with* Sculpture, and Monuments *without* Sculpture - including the base for Monuments with *Cannon*. Instability in the sculpture and its base can be detected by a number of factors. Indicators may be obvious or subtle. Visually examine the sculpture and its base.

	Sculpture	Base
If hollow, is the internal support unstable/exposed? (look for signs of exterior rust)	___	___
Any evidence of structural instability? (look for cracked joints, missing mortar or caulking or plant growth)	___	___
Any broken or missing parts? (look for elements (i.e., sword, musket, hands, arms, etc. - missing due to vandalism, fluctuating weather conditions, etc.)	___	___
Any cracks, splits, breaks or holes? (also look for signs of uneven stress & weakness in the material)	___	___

**Surface Appearance** (check as many as may apply)

	Sculpture	Base
Black crusting	___	___
White crusting	___	___
Etched, pitted, or otherwise corroded (on metal)	<input checked="" type="checkbox"/>	___
Metallic staining (run-off from copper, iron, etc.)	___	___
Organic growth (moss, algae, lichen or vines)	___	___
Chalky or powdery stone	___	___
Granular eroding of stone	___	___
Spalling of stone (surface splitting off)	___	___
Droppings (bird, animal, insect remains)	___	___
Other (e.g., spray paint graffiti) - Please describe...	___	___

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

**Surface Coating**

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

**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) .

Triangular granite base with 4 cannon, three positioned  
vertically in order to form a tripod, plus one cannon positioned  
vertically atop the tripod

**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 July 4, 2004

Your Name Kevin Tucker

Address 58 Forest Street

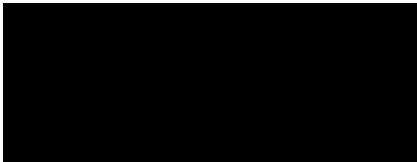
City Wakefield

State MA Zip Code 01880

Telephone 

Please send this completed form to:

Todd A. Shillington, PCC



Thank you for your help, and attention to detail.

SONS OF UNION VETERANS OF THE CIVIL WAR  
 National Civil War Memorials Committee

