

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. E. J. Griggs Post no. 97) 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 9/15/1885 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 Town Common, Belchertown, MA
 City/Village _____ Township _____ County _____

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 Town of Belchertown Dept./Div. _____
 Street Address PO Box 670 (2 Jabish St)
 City Belchertown State MA Zip Code 01007-0670
 Contact Person Gary Brougham Telephone (413) 323-0403

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

Never moved

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.) Cast Zinc

Material of the Sculpture = Stone Concrete Metal Undetermined
 If known, name specific material (color of granite, marble, etc.) Cast Zinc
 If the Sculpture is of metal, is it solid cast or "hollow?" hollow

Material of Plaque or Historical Marker / Tablet = zinc

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 28' Width 77 11/16" Depth 77 3/4" or Diameter _____
 Sculpture: Height _____ 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 _____
Monumental Bronze Co., Bridgeport, CT

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.

2nd level:(south)Gettysburg, (west) Wilderness, (north) Yorktown, (east) Fair Oaks-Port Hudson. 3rd level has the names of the "Living Belchertown Soldiers of the War of the Rebellion". next level: (South)"Dedicated to the memory of those who fought and died from this town in the rebellion 1861-1865 and all soldiers now citizens of Belchertown. Also in memory of those from Belchertown who served in the Revolutionary or any Colonial or any United States War"., (West) "Roll of the Honored Dead who went from Belchertown and fought in defence of Liberty and their Country."(list of Names), (North)" Soldiers of the Revolution. Died in the Service."(list of Names), (East)"Soldiers of the war of the Rebellion now citizens of Belchertown who enlisted elsewhere." (list of names). Next level:(S) "Erected 1884", (w)image of sailor and anchor, (N)stack of 3 rifles, (E) Soldier standing at rest. For the balance, please see Ron Harvey's Report

Environmental Setting

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

Type of Location

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

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).
Basically the monument is leaning in 2 different directions(bend in the middle)

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 2004

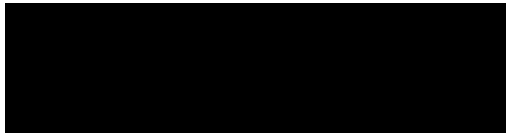
Your Name Edward T. Knight

Address 50 Eskett Rd City Belchertown

State MA Zip Code 01007-8902 Telephone [REDACTED]

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