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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.

Type of Memorial

- Thank You.

Monument with Sculpture	Monument with Cannon					
Monument without Sculpture	Historical Marker	Plaque				
Affiliation G.A.R. (Post Name & No. Mitchell	Post 29	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 1916	Please consult any/all	newspaper archives for a				
local paper's article that would have information on the <i>fin</i> Please submit a copy of your findings with full identification						
Please submit a copy of your lindings with full identification	of the paper & date of publication	i. Thank you.				
Location						
The Memorial is <i>currently</i> located at: Street/Road address or site location <u>Ash</u> City/Village <u>Asktor</u> Township	iter Censifery					
City/Village Askton Township	Flago County 2	tec Lec				
, , , , , , , , , , , , , , , , , , , ,	5)	/ /				
The front of the Memorial faces: Nort	h South Ea	st 📝 West				
Government Body, Agency, or Individual Owne	er (of private cemetery that Me	morial is located in)				

Name	Village	01-13	nten		Dept./	DIV			
Street	Address	807	man	ST.					_
	Ashton				State		Zip Code		
	ct Person	1211			Telep	hone (815-) 59	3-7.741	_

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

Physical Details

Material of Monument or base under a Sculpture or Cannon = ___Stone \checkmark Concrete ___ Metal ___ Undetermined If known, name specific material (color of granite, marble, etc.) ______

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Material of the Sculpture =StoneConcreteMetalUndetermined 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 =BronzeIron - Consult known Ordnance Listing to confirm Markings on muzzle = Markings on Left Trunion Is inert ammunition a part of the Memorial?
Approximate Dimensions (indicate unit of measure) - taken from tallest / widest points Monument or Base: Height 12' Width 8' Depth 8' 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: 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 TO THE Memory of seldies and selder 1861-1865
Environmental Setting
(The general vicinity and immediate locale surrounding a memorial can play a major role in its overall condition.) Type of Location
V Cemetery Park Plaza/Courtyard "Town Square" Post Office School Municipal Building State Capitol Other: Courthouse College Campus Library

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General Vicinity

✓ Rural (low population, open land)

____ Town

____ Suburban (residential, near city) 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		1
White crusting		
Etched, pitted, or otherwise corroded (on metal)		
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?

1/ No Yes

Unable to tell

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Surface Coating

									/					
Does	there	appear	to	be	а	coating?	-	Yes	<u>_/</u>	No		Unable	to	determine
lf knov	wn, ide	ntify typ	e of	coa	tin	g.								
G	ilded	Pain	ted		Va	arnished _	W	axed		Unat	ole to	determi	ne	
Is the	coating	in good	con	ditio	n?	Yes	-	_No			Unal	ble to def	erm	line

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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 (affilia	ation / overall	condition 8	k any	concern	not	already	touched	on)	
Soldir ware	Front with	Musket s	standing	<x .<="" td=""><td>Rest.</td><td></td><td></td><td></td><td></td><td>_</td></x>	Rest.					_

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 2-6 - 2010	
Your Name Greg Caster	
Address 1408 263 55	City Rockfor
State IL Zip Code 6(1033	Telephone

Please send this completed form to:

Kevin P. Tucker, PDC, Chair



Thank you for your help, and attention to detail.

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

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