

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. _____) ___ 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: GAR Ladies Auxiliaries

Original Dedication Date 1891 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 Grant Park
 City/Village Galeva Township Galeva County Jo Dawess

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 Galeva Dept./Div. Building Dept
 Street Address 312 1/2 N. Main St.
 City Galeva State IL Zip Code 61036
 Contact Person Duff Stewart Telephone (315) 777-1050

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.) Green + Gold Concrete.

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

Material of Plaque or Historical Marker / Tablet = BRONZE

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? NO If so, describe _____

Approximate Dimensions (indicate unit of measure) - taken from tallest / widest points
 Monument or Base: Height 3' Width _____ Depth _____ or Diameter 2 1/2'
 Sculpture: Height 5' Width 3' Depth 3' 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.

LADIES AUXILIARY 1891

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 checked="" 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 | _____ |
| <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) .

SAR Ladies Auxiliary Fountain, Octagon font, with a figure of a woman crouching down and holding a torch. Each corner of the octagon has a floral urn

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 01-17-2010

Your Name Greg Carter

Address 1808 26th STREET

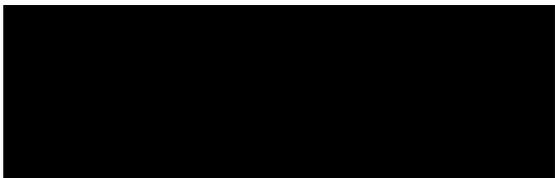
City Rouletford

State IL Zip Code 61103

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



1891 GAR L.A.
Fountain
Galeva, IL