

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

PLEASE:

- 1. Type or print, using a ball-point pen, when filling out this form. Legibility is critical.
- 2. 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 without Sculpture
- Other (flag pole, G.A.R. buildings, stained glass windows, etc.)
- Monument with Cannon
- Historical Marker Plaque

Affiliation

- G.A.R. (Post Name & No. _____) M.O.L.L.U.S.
- SUVCW (Camp Name & No. Willie Grout Camp #25) (Please describe below)
- WRC (Corps Name & No. _____)
- ASUVCW (Aux Name & No. _____)
- DUVCW (Tent Name & No. _____)
- LGAR (Circle Name & No. _____)
- Other _____

Original Dedication Date July 15, 1874 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 Foster Street
City/Village Worcester Township _____ County Worcester
State Massachusetts

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 Worcester
Dept./Div. _____
Street Address 455 Main Street City _____
Worcester State MA Zip Code 01610 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.) _____

SUVCW -- CIVIL WAR

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?" Hollow _____

Material of Plaque or Historical Marker / Tablet = Yes _____

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 _____ Width _____ Depth _____ 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 Plaques _____

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.

Environmental Setting

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

Type of Location

- Cemetery
- "Town Square"
- Municipal Building
- Courthouse
- Traffic Circle

- Park
- Post Office
- State Capitol
- College Campus
- Library

- Plaza/Courtyard
- School
- Other: _____
- _____
- _____

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)	<u>No</u>	<u>No</u>
Any evidence of structural instability? (Look for cracked joints, missing mortar or caulking or plant growth)	<u>No</u>	<u>No</u>
Any broken or missing parts? (Look for elements (i.e., sword, musket, hands, arms, etc. - missing due to vandalism, fluctuating weather conditions, etc.)	<u>No</u>	<u>No</u>
Any cracks, splits, breaks or holes? (Also look for signs of uneven stress & weakness in the material)	<u>No</u>	<u>No</u>

Surface Appearance (check as many as may apply)

	Sculpture	Base
Black crusting	___	___
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? 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) .

Erected by the G.A.R. Post #10 with the City of Worcester for the 398 residents who died during the war.

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 February 4, 2016

Your Name Reynaldo Rodriguez

Address 20 Howland Terrace

City Worcester

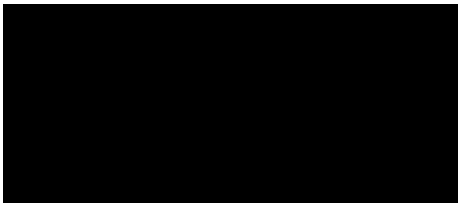
State MA Zip Code 01602

Telephone [REDACTED]

What Order or Organization is submitter a member of? SUVCW

Please send this completed form to

Walt Busch. PDC. Chair



Thank you for your help, and attention to detail. SONS OF UNION V

CIVIL WAR VETERANS OF THE National Civil War Memorials Committee

