



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

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**

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



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) .

GOOD EXCEPT FOR ALGAE  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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**

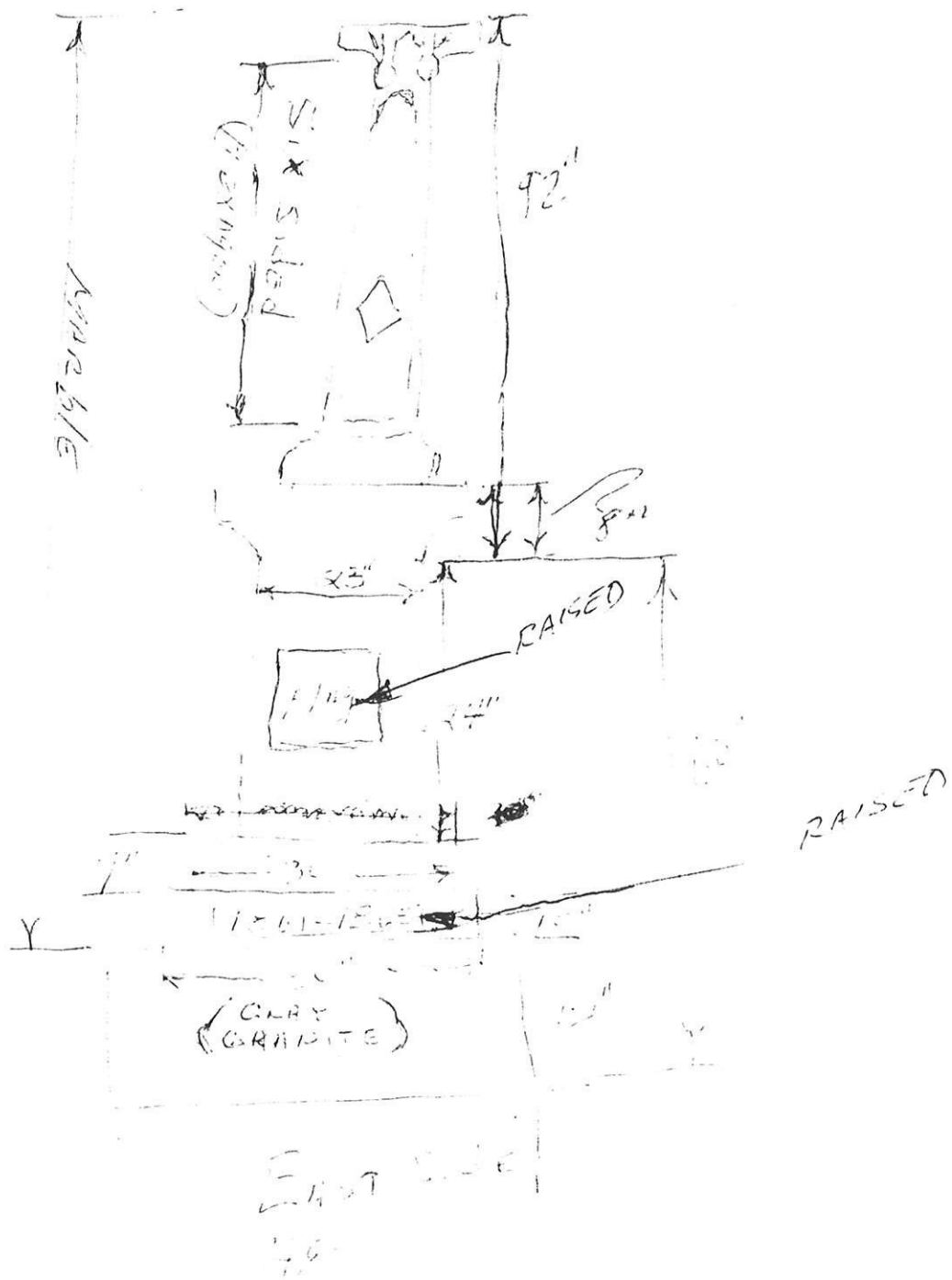
Date of On-site Survey MAR 97  
Your Name BILL LOWE / MAX MILLER  
Address 3916 ALLSTON City JACKSON  
State (If Non-Michigan Resident) MICH Zip Code 49201 Telephone 

Please send this completed form to:

William R. Morris  
10324 W. Stanley Rd.  
Flushing, MI 48433-9247

Thank you for your help, and attention to detail.

Kent Armstrong, Chair  
Memorials Subcommittee - Department of Michigan



Common COUNTRY  
 (RURAL HOME)

110















1861-1865