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

Type of Memorial (check all applicable)

Monument ____with Sculpture ____without Sculpture ____with Cannon _____standalone Cannon _____Historical Marker _ Plaque ____Other (flag pole, G.A.R. buildings, stained glass windows, etc.)

Affiliation

GAR	MOLLUS		SUVCV	V	WRC	ASUVCW
LGAR	DUVCW	~	Other	Unknown		

If known, record name and number of post, camp, corps, auxiliary, tent, circle or appropriate information of other groups: Probably Fairfield Co erected to honor MOH recipients from Civil War and Indian Wars

Original Dedication Date Appears to be post 2000 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 Zane Park NW Corner of S Broad St & E Main St

	GPS Coordinates N39°42' 51.3399" W82°36' 7.7700"		
City/Village &/or Township Lancaster			
County Fairfield	State MO	Zip Code <u>43130</u>	
The front of the Memorial faces: North	South 🖌 East	West	
Government Body, Agency, or Individual (Name Fairfield County Parks	Owner		
Dept./Div.			
Street Address 407 E Main St			
City Lancaster	State OH	Zip Code 43130	
Contact Person UNK		81-7249 ext	
Is Memorial on the National Register of Histo	ric PlacesYes	No ID # if known	
For Monuments with/without sculpture: Physical Details Material of Monument or base under a Sculpture or Ca If known, name specific material (color of granite, mar			
Material of the SculptureStoneConcrete		er Is it hollow or solid?	
If known, name specific material (color of granite, mar	ble, etc.)		

>This form may be photocopied.<

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For Historic Marker or Plaque:

Material of Plaque or Historical Marker / Tablet = Black GranitePolished Engraved Block with

For Cannons with/without monument:

Material of Cannon = Bronze Iron Type of	Cannon (if known)
	Rifled YES NO
Markings: Muzzle	Base Ring/Breech
Left Trunion	Right Trunion
Is inert ammunition a part of the Memorial? Yes	No
[For camp/department monuments officer's use: Cannon	on list of known ordnance]YesNo
For Other Memorials: (flag pole, G.A.R. buildings	s, stained glass windows, etc.)
What best describes the memorial	

Materials of the Memorial

Complete for All Memorials

Approximate Dimensions (indicate unit of measure) - taken from tallest / widest points

<u>6 ft</u> Height <u>4.5 feet</u> Width <u>8"inch</u> Depth or Diameter

For Memorials with multiple Sculptures, please record this information on a separate sheet of paper for each statue (service, pose, etc) 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

Please attach legible photographs of all text &/or Record the text in the space below. Please use the addendum – narrative sheet if necessary.

See Pictures

>This form may be photocopied.<

Environmental Setting

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

Type of Location Cemetery School Traffic Circle	 ✓ Park Municipal Building Library 	Plaza/Courtyard State Capitol Other:	"Town Square" Courthouse	Post Office College Campus
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				

[To detail the condition of a monument used the addendum form for Monument's Condition]

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.

Addendums attached to this electronic file are the *Monument's Condition* and the *Narrative* forms. Only the *Monument's Condition* form is required if you are requesting grant money using form CWM-62 *SUVCW Memorial Grant Application Form and Instructions.*

Thank you.

Inspector Identification	Date of On-site Survey	03/09/2020	
Your Name Walter Busch	-		
Address 1240 Konert Valley Dr			
City Fenton	State MO	Zin Code 63026	
Telephone			
Are you a member of the Allie US Grant Camp 68, SUVCW	ed Orders of the G.A.R.? If	so, which one?	

Please send this completed form to:

Walt Busch, PDC, Chair 1240 Konert Valley Dr. Fenton, MO 63026

Thank you for your help, and attention to detail.

Sons of Union Veterans of the Civil War – Civil War Memorials Committee.





