

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: Village of Madison, OH

Original Dedication Date July 5, 1897 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 Town Square
 City/Village Madison Township _____ County Lake

The front of the Memorial faces: ___ North ___ South ___ East ___ West unknown

Government Body, Agency, or Individual Owner (of private cemetery that Memorial is located in)...

Name Village of Madison Dept./Div. _____
 Street Address 126 N. Main St.
 City Madison State OH Zip Code 44057
 Contact Person Mayor Telephone (440) 428-7526

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.) limestone

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 = metal

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 11ft. Width _____ Depth _____ or Diameter _____
 Sculpture: Height 6 ft. 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 _____
 Sculptor: unknown

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.
"Dedicated July 5, 1897. Erected in memory of/the Soldiers and Sailors/
who offered their lives in/defense of their country/ 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

- | | | |
|---|---|--|
| <input type="checkbox"/> Cemetery | <input type="checkbox"/> Park | <input type="checkbox"/> Plaza/Courtyard |
| <input checked="" 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) .

Monument is in good condition and apparently maintained
by the Village of Madison. However, is is made of limestone,
not granite, but is in good condition still.

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 (None made at this point(time and resources do not allow)

Date of On-site Survey _____

Your Name William C. Stark

Address 3037 W. 224th St. City Fairview Park

State OH Zip Code 44126 Telephone [REDACTED]

Nov. 8, 2010

Please send this completed form to:

Kevin P. Tucker, PDC, Chair
58 Forest Street
Wakefield, MA 01880



Thank you for your help, and attention to detail.

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

