

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: Citizens of Richmond, Va

**Original Dedication Date** 1866 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 Richmond Cemetery  
 City/Village Richmond Township Richmond County Melferry

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 Richmond Cemetery Ass'n. Dept./Div. \_\_\_\_\_  
 Street Address 5600 Hunter Drive  
 City Richmond State IL Zip Code 60071  
 Contact Person \_\_\_\_\_ Telephone (815) 678-4271

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.) white concrete.

Material of the Sculpture = \_\_\_ Stone  Concrete \_\_\_ Metal \_\_\_ Undetermined  
 If known, name specific material (color of granite, marble, etc.) white concrete  
 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? NO If so, describe \_\_\_\_\_

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

Monument or Base: Height 2' Width 38 Depth 3' or Diameter \_\_\_\_\_  
 Sculpture: Height 8' Width 1.5' Depth 1.5' or Diameter 1.5'

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.

RESPECTFULLY DEDICATED  
TO THE MEMORY OF THE DEPARTED HEROES OF THE 95<sup>TH</sup> REGIMENT AND ALL  
UNION SOLDIERS OF THE WAR OF 1861 WHO NOBLY FOUGHT AND MAULFULLY  
FELL IN DEFENSE OF THE FLAG OF OUR COUNTRY.

**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        | _____               |



**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)

*Conical obelisk on square base. Obelisk is carved to represent a flag draped around a pike.*

**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 9-1-2010

Your Name Greg Carter

Address 1408 26<sup>th</sup> ST.

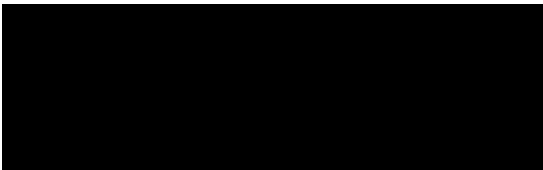
City Rockford

State IL Zip Code 61108

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

