PLEASE:

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NATIONAL ORGANIZATION

SONS OF UNION VETERANS OF THE CIVIL WAR

CIVIL WAR MEMORIAL ASSESSMENT FORM

 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 Historical Marker Plaque
Monument with SculptureMonument with Cannon
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) ○ F I □ UNOIS) □ Other:
Original Dedication Date 6-1-1-129 Please consult any/all newspaper archives for a local paper's article that would have information on the <i>first</i> 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 1500 N. Second ST. City/Village Rockford Township Rockford County unaways.
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 Reckford Park DISTRICT Dept./Div. Maintenance Street Address 401 S. Court STREET
City Rockford State 1C Zip Code 6.102 Contact Person Transporte Telephone (815) 987-8800
Contact Person <u>fine Dimice</u> Telephone (815) <u>987-8500</u>
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.)

Material of the Sculpture = Stone Concrete Metal Undetermined If known, name specific material (color of granite, marble, etc.) te
If the Sculpture is of metal, is it solid cast or "hollow?"
Material of Plaque or Historical Marker / Tablet = Browze
Material of Cannon =BronzeIron - 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
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 3" Width 3' Depth 3' or Diameter Sculpture: Height 35' Width 2' Depth 2' 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. $1867 - 1865$
DEDICATED IN MEMORY OF OUR FATHERS
DEDICATED IN MEMORY OF OUR FATHERS BY ILLINOIS DEPARTMENT Daughter of Union Viterans of The Civil War 35th Annual Convention
Environmental Setting
(The general vicinity and immediate locale surrounding a memorial can play a major role in its overall condition.) Type of Location
Cemetery Park Plaza/Courtyard
"Town Square" Post Office School
Municipal Building State Capitol Other:
Courthouse College Campus
Traffic Circle

General Vicinity Rural (low population, open land) Town	Suburban (residential, near cit Urban / Metropolitan	ty)
Immediate Locale (check as many as may apply) Industrial Commercial Street/Roadside within 20 feet Tree Cov Protected from the elements (canopy or enclosure Protected from the public (fence or other bar Any other significant environmental factor	vered (overhanging branches) ure, indoors) vrier)	
Condition Information		
Structural Condition (check as many as may a	nnly)	
The following section applies to Monuments with Sculpture		
including the base for Monuments with <i>Cannon</i> . Instabilit by a number of factors. Indicators may be obvious or state.	y in the sculpture and its base can be d subtle. Visually examine the sculpture	letected and its
	Sculpture	Base
If hollow, is the internal support unstable/exposed?		
(look for signs of exterior rust) Any evidence of structural instability? (look for cracked joints, missing mortar or caulking or plant gr	rowth)	•
Any broken or missing parts? (look for elements (i.e., sword, musket, hands, arms, etc midue to vandalism, fluctuating weather conditions, etc.)	issing	
Any cracks, splits, breaks or holes? (also look for signs of uneven stress & weakness in the mater	rial)	(
Surface Appearance (check as many as may	apply)	
Black crusting	Sculpture	Base
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		+1)
Be repaired IN 2010 by OUT Camp	TE DONAN OFF. MIEVOU	70_
, ,		
Does water collect in recessed areas of the Memorial	?Yes _V_NoUnable t	o 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) . Sundial AT Entrance To Simuss pp. Rose Gooden.
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, published 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 //-27-2009
Your Name Grego-, Canter Address 1408 26 STREET City Rockford
Your Name Gregory Canter Address 1408 26 STREET City Rockford State 16 Zip Code 6108 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

