

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. Baker Post 351)                       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: \_\_\_\_\_

**Original Dedication Date** unknown 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 Stillman Valley Cemetery  
 City/Village Stillman Valley Township Sycamore Creek County Ogle

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 Stillman Valley Cemetery Dept./Div. \_\_\_\_\_  
 Street Address 120 N. WALNUT STREET  
 City Stillman Valley State IL Zip Code 61084  
 Contact Person Jim Mays Telephone (815) \_\_\_\_\_

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 Blocks

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 = CA+Co 1862 / CA+Co 1864  
 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 4' Width 4' Depth 4' 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 | <input type="checkbox"/> Park           | <input type="checkbox"/> Plaza/Courtyard |
| <input 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        | _____                                    |

**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 \_\_\_\_\_

**Condition Information**

**Structural Condition (check as many as may apply)**

The following section applies to Monuments *with* Sculpture, and Monuments without Sculpture - including the base for Monuments *with* Cannon. Instability in the sculpture and its base can be detected by a number of factors. Indicators may be obvious or subtle. Visually examine the sculpture and its base.

	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 growth)	___	<input checked="" type="checkbox"/>
Any broken or missing parts? (look for elements (i.e., sword, musket, hands, arms, etc. - missing due to vandalism, fluctuating weather conditions, etc.)	___	___
Any cracks, splits, breaks or holes? (also look for signs of uneven stress & weakness in the material)	___	<input checked="" type="checkbox"/>

**Surface Appearance (check as many as may apply)**

	Sculpture	Base
Black crusting	<input checked="" type="checkbox"/>	___
White crusting	___	<input checked="" type="checkbox"/>
Etched, pitted, or otherwise corroded (on metal)	<input checked="" type="checkbox"/>	___
Metallic staining (run-off from copper, iron, etc.)	___	<input checked="" type="checkbox"/>
Organic growth (moss, algae, lichen or vines)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Chalky or powdery stone	___	___
Granular eroding of stone	___	___
Spalling of stone (surface splitting off)	___	<input checked="" type="checkbox"/>
Droppings (bird, animal, insect remains)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Other (e.g., spray paint graffiti) - Please describe...	___	___

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) .

Two Pillars - Each mounts an M184/ 8" Siege mortar.

\* This memorial is being restored by the John A. Logan Camp 26  
 Summer 2010 \*

**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 12-23-2009

Your Name Greg Carter

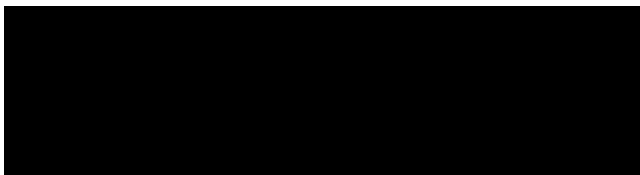
Address 1408 26th St

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

