FORM CWM #61 Page 1 of 4

NATIONAL ORGANIZATION SONS OF UNION VETERANS OF THE CIVIL WAR

CIVIL WAR MEMORIAL ASSESSMENT FORM

PLEASE:

- 1. Type or print, using a ball-point pen, when filling out this form. Legibility is critical.
- 2. 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
Affiliation
G.A.R. (Post Name & No) M.O.L.L.U.S
SUVCW (Camp Name & No) (Please describe below)
WRC (Corps Name & No)
ASUVCW (Aux Name & No)
DUVCW (Tent Name & No) LGAR (Circle Name & No)
Other
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 <i>currently</i> located at: Street/Road address or site location Wyoming Cemetery
City/Village Wyoming Township Wyoming County Stark
State Illinois .
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 City of Wyoming
Dept./Div. Public Works
Street Address 108 E. Williams Street City
Wyoming State L Zip Code 61491 Contact Person
Dave Wright Telephone () 309-695-4841
If the Memorial has been moved, please list former location(s).

FORM CWM #61 Page 2 of 4

Physical Details

Material of Monument or base under a Sculpture or Cannon name specific material (color of granite, marble,		_ Metal Undetermined If known 		
SUVCW CIVIL WAR				
Material of the Sculpture = StoneCon If known, name specific material (color of granite If the Sculpture is of metal, is it solid cast or "h	e, marble, etc.)			
Material of Plaque or Historical Marker / Tablet =				
Material of Cannon =Bronze _X _ Iron - Co Markings on muzzle = None visible	nsult known Ordnance L	isting to confirm		
Markings on muzzle = None visible Markings on Left Trunion Is inert ammunition a part of the Memorial? No	Right Trunion			
is their animunition a part of the Memorial?	ii so, describe			
Approximate Dimensions (indicate unit of monument or Base: Height Width Dept	easure) - taken from talle Depth or Di th or Diameter _	est / widest points nameter		
For Memorials with multiple Sculptures, please for each statue and attach to this form. Please weapons/implements involved (in case your pl	e describe the "pose" of e	each statue and any		
Markings/Inscriptions (on stone-work / meta Maker or Fabricator mark / name? If so, give name				
The "Dedication Text" is formed: cut into r	material raised up fro	om material face		
Record the text (indicate any separation if on dif	ferent sides) Please use a	additional sheet if necessary.		
Environmental Setting (The general vicinity and immediate locale surrounding a management Type of Location	nemorial can play a major role ir	າ its overall condition.)		
 Cemetery "Town Square" Municipal Building Courthouse Traffic Circle 	_Park _Post Office _State Capitol _College Campus _Library	Plaza/Courtyard School Other:		

FORM CWM #61 Page 3 of 4

General Vicinity X Rural (low population, open land) Town	Suburban (residen Urban / Metropolita	
Immediate Locale (check as many as may apply) Industrial Commercial × Street/Roadside within 20 feet × Tree Covered (composed from the elements (canopy or enclosure, incomposed from the public (fence or other barrier) Any other significant environmental factor	doors)	
Condition Information		
Structural Condition (check as many as may apply) The following section applies to Monuments <i>with</i> Sculpture, and including the base for Monuments with <i>Cannon</i> . Instability in the number of factors. Indicators may be obvious or subtle. Visually	sculpture and its base can	be detected by a
If hollow, is the internal support unstable/exposed?	Sculpture	Base
(Look for signs of exterior rust) Any evidence of structural instability? (Look for cracked joints, missing mortar or caulking or plant groups)	 owth)	_
Any broken or missing parts? (Look for elements (i.e., sword, musket, hands, arms, etc mi due to vandalism, fluctuating weather conditions, etc.)	ssing	
Any cracks, splits, breaks or holes? (Also look for signs of uneven stress & weakness in the materi	al)	
Surface Appearance (check as many as may apply)		
Black crusting White crusting	Sculpture <u>×</u>	Base
Etched, pitted, or otherwise corroded (on metal) Metallic staining (run-off from copper, iron, etc.)	X	X
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		
Does water collect in recessed areas of the Memorial?	_Yes <u>×</u> No Unable	e to tell

FORM CWM #61 Page 4 of 4

Surface Coating
Does there appear to be a coating? Yes × No Unable to determine
If known, identify type of coating. Gilded Painted 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 X 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). ten-inch bore Parrott Rifle on two piece concrete base. The massive cannon needs to be sanded and repainted. Near the cannon is a flag
pole but no flag has been flown on it for some time.

Supplemental Background Information

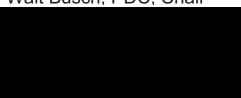
In addition to your on-site survey, any additional information you can provide on the described Memorial will be welcomed. Please label each account with its source (author, title, publisher, date, pages). Topics include any reference to the points listed on this questionnaire, plus any previous conservation treatments - or efforts to raise money for treatment. Thank you.

Inspector Identification

Date of On-site Survey 10-8-2011	
Your Name Gregory M. Carter PCC	
Address 1601 S. 24th Street, Apt. 407	City Quincy
State L Zip Code 62301	Telephone (
What Order or Organization is submitter a	member of? SUVCW & MOLLUS

Please send this completed form to

Walt Busch, PDC, Chair



Thank you for your help, and attention to detail. Sons of Union V

CIVIL WAR VETERANS OF THE National Civil War Memorials Committee