

NATIONAL ORGANIZATION
SONS OF UNION VETERANS OF THE CIVIL WAR
CIVIL WAR MEMORIAL ASSESSMENT FORM

Type of Memorial (check all applicable)

Monument with Sculpture without Sculpture with Cannon standalone Cannon
 Historical Marker Plaque Other (flag pole, G.A.R. buildings, stained glass windows, etc.)

Affiliation

GAR MOLLUS SUVCW WRC ASUVCW
 LGAR DUVCW Other

If known, record name and number of post, camp, corps, auxiliary, tent, circle or appropriate information of other groups:

Original Dedication Date MAY 30, 1939 BY FAIRFIELD MEMORIAL SOCIETY
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 M-52 1/4 MILE N/O CHURCH ST.
GPS Coordinates _____

City/Village &/or Township FAIRFIELD
County LENAWEE State MICHIGAN Zip Code 49248

The front of the Memorial faces: North South East West

Government Body, Agency, or Individual Owner

Name FAIRFIELD TOWNSHIP
Dept./Div. _____
Street Address 1023 PINE ST.
City JASPER State MICHIGAN Zip Code 49248
Contact Person CURT EMMONS Telephone (517) 436-6400 ext _____
SUPERVISOR

Is Memorial on the National Register of Historic Places Yes No ID # if known _____

For Monuments with/without sculpture:

Physical Details

Material of Monument or base under a Sculpture or Cannon = Stone Concrete Metal Other
If known, name specific material (color of granite, marble, etc.) _____

Material of the Sculpture Stone Concrete Metal Other Is it hollow or solid? _____
If known, name specific material (color of granite, marble, etc.) _____

For Historic Marker or Plaque:

Material of Plaque or Historical Marker / Tablet = BRONZE

For Cannons with/without monument:

Material of Cannon = Bronze Iron Type of Cannon (if known) Rifled YES NO

Markings: Muzzle Base Ring/Breech
 Left Trunion Right Trunion

Is inert ammunition a part of the Memorial? Yes No

[For camp/department monuments officer's use: Cannon on list of known ordnance] Yes No

For Other Memorials: (flag pole, G.A.R. buildings, stained glass windows, etc.)

What best describes the memorial STONE BOULDER W/ AFFIXED PLAQUE

Materials of the Memorial

Complete for All Memorials

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

 Height Width Depth or Diameter

For Memorials with multiple Sculptures, please record this information on a separate sheet of paper for each statue (service, pose, etc) 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

Please attach legible photographs of all text &/or Record the text in the space below. Please use the addendum – narrative sheet if necessary.

SEE PHOTOS

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 Courthouse College Campus
 Traffic Circle Library Other: _____

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 _____

[To detail the condition of a monument used the addendum form for *Monument's Condition*]

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.

Addendums attached to this electronic file are the *Monument's Condition* and the *Narrative* forms. Only the *Monument's Condition* form is required if you are requesting grant money using form CWM-62 *SUVCW Memorial Grant Application Form and Instructions*.

Thank you.

Inspector Identification _____ Date of On-site Survey SEPT. 2016
Your Name GREG SEBRING
Address 605 PEQUIT WAY
City TECUMSEH State MI Zip Code 49286
Telephone [REDACTED]

Are you a member of the Allied Orders of the G.A.R.? If so, which one?
S.U.V. CW. DEPT. OF MICH. NASH - HODGES CAMP # 43

Please send this completed form to:

Walt Busch, PDC, Chair
1240 Konert Valley Dr.
Fenton, MO 63026
[REDACTED]

Thank you for your help, and attention to detail.

SONS OF UNION VETERANS OF THE CIVIL WAR - CIVIL WAR MEMORIALS COMMITTEE.

SONS OF UNION VETERANS OF THE CIVIL WAR
CIVIL WAR MEMORIAL ASSESSMENT FORM
ADDENDUM - MONUMENT'S CONDITION

Completion of this form is required when requesting grant money using form CWM-62 SUVCW Memorial Grant Application Form and Instructions.

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.

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)

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)

Diagram with columns for Sculpture and Base, and a handwritten 'NO' in the center.

Surface Appearance (check as many as may apply)

- Black crusting
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...

Diagram with columns for Sculpture and Base for surface appearance assessment.

Does water collect in recessed areas of the Memorial? Yes No X Unable to tell

Surface Coating

Does there appear to be a coating? Yes No X 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?

X Well maintained Would benefit from treatment In urgent need of treatment Unable to determine

Briefly describe the Memorial (affiliation / overall condition & any concern not already touched on).

Inspector's Name Gregory M. Selway

Date 9/12/2016