SONS OF UNION VETERANS OF THE CIVIL WAR DEPARTMENT OF MICHIGAN CIVIL WAR MEMORIAL ASSESSMENT FORM

P	L	E	A	S	E	

- 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 BLACK & WHITE photograph of each viewable side and label it with name & direction of view.

- Thank You. Type of Memorial ___ Monument with Cannon Historical Man ___ Monument *with* Sculpture X Monument <u>without</u> 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._____) Which?_____ DUVCW (Tent Name & No._____) Other: STATE MICHIGAN **Dedication Date**Please consult any/all newspaper archives for a local paper's article that would have information on the 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: MT EVERGREEN CEMETERY Street/Road address or site location MORRELL AT GREEN WOOD City/Village JACKSSM Township ____ County JACKSSM The front of the Memorial faces: ___ North ___ South ___ East X West Government Body, Agency, or Individual Owner (of private cemetery that Memorial is located in)... Name CITY OF JACKSON Dept./Div. CITY CEMETERIES
Street Address 2615 FRANCIS ST City JACKSON State (if not Michigan) MI Zip Code 49203 Contact Person BRIAN MCKENZI Felephone (517) 788-4078 If Memorial has been moved, please list former location(s)...

Physical Details Material of Monument or base under a Sculpture or Cannon = \(\subseteq \sub

MATERIAL UNKNOW

	Material of the Sculpture = If known, name specific material If the Sculpture is of metal, i	al (color of gra	nite, marble, etc.) _			
	Material of Plaque or Histori					S
	Material of Cannon =Br Markings on muzzle = Markings on Left Trunion					
	Markings on Left Trunion Is inert ammunition a part of	f the Memoria	Right Tru I? If so, de	union escribe		
	Approximate Dimensions Monument or Base: Height Sculpture: Height	(indicate unit ———— Widt ——— Widt	of measure) - tak h <u>30½</u> Depth . h Depth .	en from talle 5 3/4 or l	est / widest points Diameter Diameter	
	For Memorials with multiple sheet of paper for each sta each statue and any wea separated from this form).	tue and attac pons/impleme	h to this form. F	Please desc	ribe the "pose" of	
	Markings/Inscriptions (on Maker or Fabricator mark / r				the state of the s	
	The "Dedication Text" is fo face	rmed: cu	ut into material	X raised	up from material	(p)
	Record the text (indicate any sepa	aration if on diffe	rent sides) Please	use additional	sheet if necessary.	CK)
		OH I	'X Z' PLAQU	DELON	1'X Z'PLAGE	SE
		AUS	TIN BLAIR	. '7,	AUSTIN BLAIT	2
	2		OR OF MICHA	KYAN C	OMDIZ MICH	MILIT
		186	1-1864		CIVIL WAR 818 1894	
97)			<u>818 18</u> 94	
	AUSTIN BLAIR 1818 - 1894 Environmental Setting	6	AH LOUESA BLAIR L-1897	ĵ		
FR	(The general vicinity and immediate least VERTICAL SE	ocale surrounding	a memorial can play a	major role in its	overall condition.)	
	Type of Location					
	Cemetery		Park		Plaza/Courtyard	
	"Town Square"		Post Office	Common de	School	
	Municipal Building Courthouse		State Capitol College Campus	Othe	er:	
	Traffic Circle		ibrary	-		
	A CONTRACTOR OF THE PARTY OF TH		,		and the same of th	

Rural (low population, open land) Sub Town Y Urb	ourban (residential, oan / Metropolitan	near cit
Immediate Locale (check as many as may apply)		
Industrial Co	mmercial & RE	SIDE
Street/Roadside within 20 feet Tr	ee Covered (overhar	nging brar
Protected from the elements (canopy or enclosure,	indoors)	5870.00
Protected from the public (fence or other barrier)		
Any other significant environmental factor	10.14	Clilm (f)
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for every septiment, who has been a compared to the second of the	atabiliya Nematpukli SA	i ittizai.
		- F-1
Condition Information		
Structural Condition (check as many as may apply)		
The following section applies to Monuments with Sculpture, and Mo	onuments without Scul	pture - in
the base for Monuments with Cannon. Instability in the sculpture	e and its base can be	e detecte
number of factors. Indicators may be obvious or subtle. Visually ex	amine the sculpture an	id its bas
	Sculpture	
If hollow, is the internal support unstable/exposed?	and a straight on	III de ferance
If hollow, is the internal support unstable/exposed? (look for signs of exterior rust)	And a substitution of	II Fladie IS & Scott
(look for signs of exterior rust)	y the result of	Hindran
(look for signs of exterior rust) Any evidence of structural instability? (look for cracked joints, missing mortar or caulking or plant growth)	with the straight and for the straight and for the straight and for the straight and the st	IS So To con-
(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?	yn in de see ee e	Is a first
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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).
MEMORIAL RETAINS NEW APPEARANCE
ATTHIS TIME & NO MAINTAINICE IS REQUIRED, IT SETS ON A
CONCRETE PAD WHICH IS FLUSH
WITH THE GROUND LEVEL THE
-*ORIGINAL HEADSTONES FOR BLAIR & HIS
WIFE REMAIN IN FRONT OF THE MEMORIAL
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 3/29/97
Your Name GARY WOODMAN / MAX MILLER
Address 1511 KENSINGTON DR City DACKSON
State (If Non-Michigan Resident) Zip Code

Please send this completed form to:

William R. Morris 10324 W. Stanley Rd. Flushing, MI 48433-9247

Thank you for your help, and attention to detail.

Kent Armstrong, Chair Memorials Subcommittee - Department of Michigan

