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

XX	Monument with Sculpture	XX	Monument with Car	non
	Monument without Sculpture		Historical Marker	Plaque
	Other (flag pole, G.A.R. buildings, stained glass window	NS,	etc.)	

Affiliation

G.A.R. (Post Name & No. L.C. Woodman 196)	<u> </u>
SUVCW (Camp Name & No)	(Please describe below)
WRC (Corps Name & No)
ASUVCW (Aux Name & No)	
DUVCW (Tent Name & No)
LGAR (Circle Name & No)
Other	_

Original Dedication Date 1893 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

City/Village LAWTON	Township ANTWERP	County VAN BUREN	
State MICHIGAN	·		
The front of the Memorial	faces: North South	East West	
Government Body, Agency Name VILLAGE OF LAWTON	, or Individual Owner (of private	e cemetery that Memorial is lo	cated in)
Name <u>VILLAGE OF LAWTON</u> Dept./Div	· · · · · · · · · · · · · · · · · · ·	e cemetery that Memorial is lo	cated in)
Name VILLAGE OF LAWTON	· · · · · · · · · · · · · · · · · · ·	e cemetery that Memorial is lo	cated in)
Name <u>VILLAGE OF LAWTON</u> Dept./Div	· · · · · · · · · · · · · · · · · · ·	e cemetery that Memorial is lo	,

If the Memorial has been moved, please list former location(s).

UNKOWN

Physical Details

Material of Monument or base under a Sculpture or Cannon = $\frac{XX}{Stone}$ Stone $\frac{XX}{Concrete}$ Metal ____ Undetermined If known, name specific material (color of granite, marble, etc.) GRAY GRANITE

SUVCW -- CIVIL WAR

Material of the Sculpture = <u>XX</u> Stone <u>XX</u> Concrete <u>Metal</u> <u>Undetermined</u> If known, name specific material (color of granite, marble, etc.) <u>GRAY GRANITE</u> If the Sculpture is of metal, is it solid cast or "hollow?" <u>NO</u>

Material of Plaque or Historical Marker / Tablet = <u>N/A</u>

 Material of Cannon =
 Bronze ×× Iron - Consult known Ordnance Listing to confirm

 Markings on muzzle =
 WATERVLIET AERSNAL 1918 2668 POUNDS NO. 200L. D. J..

 Markings on Left Trunion N/A
 Right Trunion N/A

 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
 58 IN
 Width
 58 IN
 Depth
 19 IN
 or Diameter

 Sculpture: Height
 15FT 8 IN
 Width
 30 IN
 Depth
 30 IN
 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 NONE

The "Dedication Text" is formed: xx cut into material _____ raised up from material face

Record the text (indicate any separation if on different sides) Please use additional sheet if necessary. (EAST SIDE)- OUR FALLEN HEROES, FROM 1861 TO 1865

(WEST SIDE) 1893

Environmental Setting

(The general vicinity and immediate locale surrounding a memorial can play a major role in its overall condition.) **Type of Location**

Cemetery XX "Town Square" Municipal Building

- Courthouse
- Traffic Circle

Park
 Post Office
 State Capitol
 College Campus
 Library

Plaza/Courtyard
School
Other:

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General Vicinity Rural (low population, open land) <u>xx</u> Town	Suburban (residential, near city) Urban / Metropolitan
Immediate Locale (check as many as n Industrial Commercial Street/Roadside within 20 feet Protected from the elements (canopy Protected from the public (fence or Any other significant environmenta	Tree Covered (overhanging branches) or enclosure, indoors) other barrier)

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)		
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)		
Surface Appearance (check as many as may apply)		
	Sculpture	Base
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		
		<u> </u>

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

Surface Coating

Does there appear to be a coating? ___ Yes ___ No <u>××</u> 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)

Overall Description

Briefly describe the Memorial (affiliation / overall condition & any concern not already touched on) . NOTHING SEEMS TO NEED ANY WORK, GOOD 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. Thank you.

Inspector Identification

Date of On-site Survey 9-20-2013	
Your Name JOHN R. KEITH	
Address 950 106th AVENUE	
State MI Zip Code 49080	Telephone (
What Order or Organization is submitter a	member of? SUVCW

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

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