SONS OF UNION VETERANS OF THE CIVIL WAR DEPARTMENT OF MICHIGAN CIVIL WAR MEMORIAL RECORD

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.

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Type of Memorial Monument with Sculpture Monument without Sculpture	Monument with <i>Cannon</i> Historical Marker Plaque	
Affiliation★ G.A.R.(Post No. 180)★ W.R.C.(Corps No. 65)★ S.U.V.C.W. (Camp No. 180)★ D.U.V.C.W. (Tent No. 5)	M.O.L.L.U.S. Other Allied Order Which?Other: Other:	
Location The Memorial is <i>currently</i> located at: Street/Road address or site location <u>300-302</u> N, HURON City/ Village <u>YPSILAN</u> Township County <u>WASHTEN</u> AW The front of the Memorial faces: North South East X West		
Government Body, Agency, or Individual Owner (or Name Street Address State (if no City State (if no Contact Person	f private cemetery that Memorial is located in) Dept./Div.	
If Memorial has been moved, please list former location(s)		
Physical Details		

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

Material of Cannon = ___Bronze ___Iron - Consult known Ordnance Listing to confirm Markings on muzzle = _____ Markings on Left Trunion______ Right Trunion ______ Is inert ammunition a part of the Memorial? _____ If so, describe

Approximate Dimensions (indicate unit of measure) - taken from tallest / widest points Monument or Base: Height <u>30</u> Width <u>4</u> Depth <u>30</u> 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 X raised up from material face

Record the text (indicate any separation if on different sides...) Please use additional sheet if necessary. IN LOVING MEMORY

OF	
CARPENTER POST No. 180	
GRAND ARMY OF THE REPUBLIC	
DEDICATED BY	
CARPENTER'S WOMAN'S RELIEF CORPS NO. 65	
CARPENTER'S CAMP NO. 180 SONS OF UNION VETERAN	5
MARTHA A. BEACH TENT NO. 5 DAUGHTERS OF UNION VETER	ANS
YPSILANTI, MICH. 1924	

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 Bui	lding	State Capitol	Other: FRONT	
Courthouse	car adv av	College Campu	us LAWPOF	
Traffic Circle		Library	EMPTYLOT	
NOTE: CITY HALL NOW LOCATED AT I SOUTH HURON - THERE IS NO STRUCTURE OR NUMBER 304 ON N. HURON AS INDICATED IN GEORGE 5 MAY'S 1965 C.W. MONUMENTS				

General Vicinity Rural (low population, open land) Town	Subarban (residential, fear city)
Immediate Locale (check as many as ma	y apply) Commercial / IZ € S (D(ENT) A (Tree Covered (overhanging branches) or enclosure, indoors)
Industrial	A Commercial COSTOCION TAC
X Street/Roadside within 20 feet	Tree Covered (overhanging branches)
Protected from the elements (canopy	or enclosure, indoors)
Protected from the public (fence or oth	ner 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 <u>without</u> 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 rest)	N/A	N/A
Any evidence of structural instability?	N/A.	NO
(look for cracked joints, missing mortar or caulking or plant growth) Any broken or missing parts?	MA	NO
(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)	N/A	NC
Surface Appearance (check as many as may apply)	Sculpture	Base
Black crusting	1	1
White crusting		+
Etched, pitted, or otherwise corroded (on metal)	+	VESI
Metallic staining (run-off from copper, iron, etc.)	-+	YZ-
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	N/A	NONE

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Does water collect in recessed areas of the Memorial?	Yes X	No Unable to tell
Surface Coating	1	
Does there appear to be a coating? Yes	∠ No	Unable to determine
If known, identify type of coating.		
Gilded Painted Varnished V	Waxed	Unable to determine
Is the coating in good condition? Yes I	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).

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 7-29-98	and the second second to be second
Your Name GARY R. WOODMAN	
Address 1511 KENSINGTON OR	City JACKSCOM
State (If Non-Michigan Resident) <u>Mi</u> Zip Code <u>49263</u>	Telephone

Please send completed Civil War Memorial Record to:

Kim Leese 1902 Green St. Saginaw, MI 48602

Thank you for your help, and attention to detail.

Kent Armstrong, Chair Memorials Subcommittee - Department of Michigan