

NATIONAL ORGANIZATION

# SONS OF UNION VETERANS OF THE CIVIL WAR

## CIVIL WAR MEMORIAL ASSESSMENT FORM

**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.

**Type of Memorial**

Monument *with* Sculpture  
 Monument *with out* Sculpture

Monument with Cannon  
 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. \_\_\_\_\_) (Please describe below)  
 DUVCW (Tent Name & No. \_\_\_\_\_)  
 Other: \_\_\_\_\_

**Original Dedication Date** 1929 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 OAK HILL CEMETERY, YEOMAN RD.  
 City/Village IONIA Township EASTON County IONIA

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 IONIA Dept./Div. CEMETERY  
 Street Address CITY HALL, 114 N. KIDD STREET, BOX 496  
 City IONIA, State MI Zip Code 48846  
 Contact Person CLERK, DAVID COOK Telephone (616) 527-4170

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

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Physical Details**

Material of Monument or base under a Sculpture or Cannon =  Stone  Concrete  Metal  Undetermined  
 If known, name specify material (color of granite, marble, etc.) RED GRANITE

*16 MI 1 in datebook  
 kept by Dept. of MI*

Material of the Sculpture = \_\_\_ Stone \_\_\_ Concrete \_\_\_ Metal \_\_\_ Undetermined  
 If known, name specific material (color of granite, marble, etc.) RED GRANITE BOULDER ON  
 If the Sculpture is of metal, is it solid cast or "hollow?" CONCRETE BASE

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 \_\_\_\_\_ Width \_\_\_\_\_ Depth \_\_\_\_\_ 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  raised up from material face

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

ERECTED TO THE UNKNOWN DEAD OF THE CIVIL WAR 1861 - 1865

N.R.C. 1929

**Environmental Setting**

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

**Type of Location**

- |  |                    |                     |
|--|--------------------|---------------------|
| <input checked="" type="checkbox"/> Cemetery | ___ Park           | ___ Plaza/Courtyard |
| ___ "Town Square"                            | ___ Post Office    | ___ School          |
| ___ Municipal Building                       | ___ State Capitol  | Other: _____        |
| ___ Courthouse                               | ___ College Campus | _____               |
| ___ Traffic Circle                           | ___ Library        | _____               |



**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) .

BRONZE PLAQUE IN NEED OF CLEANING  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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 2-6-99

Your Name DOUG ARMSTRONG

Address 236 E FREDERICK City CANSHING

State MI Zip Code 48906 Telephone 

Please send this completed form to:

Thank you for your help, and attention to detail.

SONS OF UNION VETERANS OF THE CIVIL WAR  
National Civil War Memorials Committee

ERECTED TO THE  
UNKNOWN DEAD OF THE  
CIVIL WAR  
1861 - 1865  
W. R. C. 1929

WILLIAM  
W. W. W.  
W. W. W.