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# SONS OF UNION VETERANS OF THE CIVIL WAR

## DEPARTMENT OF MICHIGAN

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

- Thank You.

**Type of Memorial**

Monument *with* Sculpture                       Monument with *Cannon*  
 Monument without Sculpture                       Historical Marker                       Plaque

**Affiliation**

G.A.R. (Post Name & No. M. W. DRESSER POST NO. 100)                       M.O.L.L.U.S.  
 W.R.C. (Corps Name & No. NO. 70)                       Other Allied Order  
 SUVCW (Camp Name & No. \_\_\_\_\_)                      Which? \_\_\_\_\_  
 DUVCW (Tent Name & No. \_\_\_\_\_)                      Other: \_\_\_\_\_

**Dedication Date** AUGUST 9, 1929 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:

Street/Road address or site location CORNER OF JOHN & BRIDGE STS, ACROSS FROM VFW HALL  
City/Village LYONS Township LYONS 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 Village of LYONS Dept./Div. PARKS  
Street Address VILLAGE OFFICE PRAIRIE ST.  
City LYONS State (if not Michigan) MI Zip Code 48851  
Contact Person CLERK, BETTE BARNES Telephone ( 517 ) 855-2125

If 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 specific material (color of granite, marble, etc.) ROSE COLORED GRANITE BOULDER

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

PLAQUE  
STONE

Monument or Base: Height 15 IN. Width 12 IN. Depth \_\_\_\_\_ or Diameter \_\_\_\_\_  
Sculpture: Height 4 FT Width 3 FT Depth 1 1/2 FT 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.

" M. W. DRESSER POST G. A. R. No. 100 W. R. C. No. 70  
DEDICATED AUG. 9, 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 type="checkbox"/> Cemetery           | <input checked="" type="checkbox"/> Park | <input type="checkbox"/> Plaza/Courtyard |
| <input type="checkbox"/> "Town Square"      | <input type="checkbox"/> Post Office     | <input type="checkbox"/> School          |
| <input type="checkbox"/> Municipal Building | <input type="checkbox"/> State Capitol   | Other: _____                             |
| <input type="checkbox"/> Courthouse         | <input type="checkbox"/> College Campus  | _____                                    |
| <input type="checkbox"/> Traffic Circle     | <input type="checkbox"/> Library         | _____                                    |



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 RESTS NEXT TO WORLD WAR II PLAQUE IN A  
PARK DEDICATED TO VETERANS

**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 AUG. 1999

Your Name DOUG ARMSTRONG

Address 236 E FREDERICK

City LANSING

State (If Non-Michigan Resident) MI

Zip Code 48906

Telephone 

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



POST  
DEDICATED  
1929