

NATIONAL ORGANIZATION
SONS OF UNION VETERANS OF THE CIVIL WAR
CIVIL WAR MEMORIAL ASSESSMENT FORM

Type of Memorial (check all applicable)

Monument with Sculpture without Sculpture with Cannon standalone Cannon
Historical Marker Plaque Other (flag pole, G.A.R. buildings, stained glass windows, etc.)

Note: try to record items separately. Cannons near monuments should be recorded & photographed separately, etc. Thank you.

Affiliation

GAR MOLLUS SUVCW WRC ASUVCW
LGAR DUVCW Other

If known, record name and number of post, camp, corps, auxiliary, tent, circle or appropriate information of other groups:

State of New York

Original Dedication Date Unknown

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

US Grant's Cottage Historic Site

The Memorial is currently located at:

Street/Road address or site location

1000 Mt McGregor Rd

GPS Coordinates N43°12'04.121 W73°44'42.588"

City/Village &/or Township Gansevoort

County Saratoga

State NY

Zip Code 12831

The front of the Memorial faces: North South East West

Government Body, Agency, or Individual Owner

Name The Friends of the Ulysses S. Grant Cottage

Dept./Div.

Street Address PO Box 2294,

City Wilton

State NY

Zip Code 12831

Contact Person

Telephone (518) 584-4353

ext

Is Memorial on the National Register of Historic Places Yes No ID # if known

For Monuments with/without sculpture:

Physical Details

Material of Monument or base under a Sculpture or Cannon = Stone Concrete Metal Other

If known, name specific material (color of granite, marble, etc.)

Material of the Sculpture Stone Concrete Metal Other Is it hollow or solid?

If known, name specific material (color of granite, marble, etc.)

For Historic Marker or Plaque: Metal combination

Material of Plaque or Historical Marker / Tablet = _____

For Cannons with/without monument:

Material of Cannon = _____ Bronze _____ Iron _____ Type of Cannon (if known) _____

Rifled _____ Yes _____ No _____

Markings: Muzzle _____ Base Ring/Breech _____

Left Trunion _____ Right Trunion _____

Is inert ammunition a part of the Memorial? _____ Yes _____ No _____

[For camp/department monuments officer's use: Cannon on list of known ordnance] _____ Yes _____ No _____

For Other Memorials: (flag pole, G.A.R. buildings, stained glass windows, etc.)

What best describes the memorial

Materials of the Memorial

Complete for All Memorials

Approximate Dimensions (indicate unit of measure) - taken from tallest / widest points

7' Height 2' Width 6" Depth or _____ Diameter

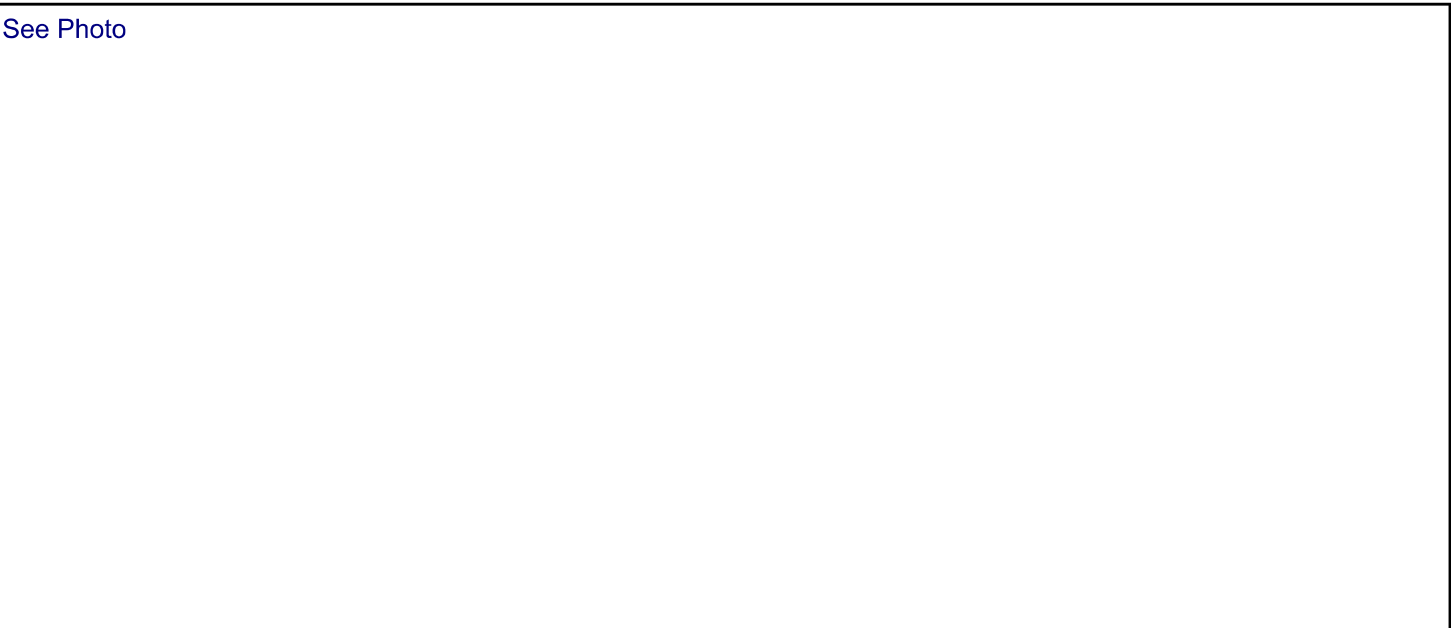
For Memorials with multiple Sculptures, please record this information on a separate sheet of paper for each statue (service, pose, etc) and attach to this form. Please describe the "pose" of each statue and any weapons/implements involved (in case your photos become separated from this form). Thank you!

Markings/Inscriptions (on stone-work / metal-work of monument, base, sculpture)

Maker or Fabricator mark / name? If so, give name & location found

Please attach legible photographs of all text &/or Record the text in the space below. Please use the addendum – narrative sheet if necessary.

See Photo



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 Building State Capitol Courthouse College Campus
 Traffic Circle Library Other: Roadway Entrance to Historic Site

General Vicinity

Rural (low population, open land) Suburban (residential, near city) Town Urban / Metropolitan

Immediate Locale (check as many as may apply)

Industrial Commercial Street/Roadside within 20 feet Tree Covered (overhanging branches)
 Protected from the elements (canopy or enclosure, indoors) Protected from the public (fence or other barrier)

Any other significant environmental factor _____

[To detail the condition of a monument used the addendum form for *Monument's Condition*]

Submission of this form requires at least one type of identification so that you may be contacted regarding the information on this form. This information will most likely be in the public domain. Your name is required; please include one (or more) pieces of contact information.

1. If a member of an Allied Order, the name of your camp, auxiliary, tent, circle or corps; along with your department;
2. Physical Address;
3. Phone Number
4. E-Mail address.

By submitting this, you are allowing the posting of this information on the internet.

Inspector Identification _____ Date of On-site Survey 07/15/2023
Your Name Walter Busch
Address _____
City Fenton State MO Zip Code 63026
Telephone () _____ E-Mail _____

Are you a member of the Allied Orders of the G.A.R.? If so, which one?

US Grant Camp 68 - MO SUVCW

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. Photographs & GPS Co-ordinates are very much desired.

Pages 4 & 5 attached to this electronic file are the Monument's Condition and the Narrative forms. Only the Monument's Condition form is required if you are requesting grant money using form *CWM-62 SUVCW Memorial Grant Application Form and Instructions*.

Please mail (or e-mail pdf, and picture files) to:

Walt Busch, PDC, Chair, 1240 Konert Valley Dr., Fenton, MO 63026, cwmemorials@suvchw.org (314) 630-8407

Thank you for your help, and attention to detail.

Sons of Union Veterans of the Civil War - Civil War Memorials Committee.

NEW YORK
ULYSSES S. GRANT
LIVED HERE
DURING HIS LAST DAYS
JUNE 16 TO JULY 23, 1885
AND COMPLETED HIS
PERSONAL MEMOIRS

Audio Tour Stop
9

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