

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.)

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:

Original Dedication Date Oct 1, 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 Triangle Park
5th + Grand Main GPS Coordinates 40.395666 -91.38360
 City/Village &/or Township Keokuk
 County Lee State Iowa Zip Code 52632

The front of the Memorial faces: ☒ North ☐ South ☐ East ☐ West

Government Body, Agency, or Individual Owner

Name City of Keokuk
 Dept./Div. _____
 Street Address 601 Main St.
 City Keokuk State Iowa Zip Code 52632
 Contact Person _____ Telephone (319) 524-5161 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:

Material of Plaque or Historical Marker / Tablet = bronze

For Cannons with/without monument:

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

	Rifled	YES	NO
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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

36" Height 30" Width _____ 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 attached

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: _____

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*]**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.

Addendums 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*.

Thank you.

Inspector Identification _____ Date of On-site Survey 10-5-20
 Your Name Tom Gaard
 Address 16541 Valleyview Lane
 City Clive State Iowa Zip Code 50325

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

SUVCW Grenville Dodge Camp #75

Please send this completed form to:

Walt Busch, PDC, Chair
 1240 Konert Valley Dr.
 Fenton, MO 63026

Thank you for your help, and attention to detail.

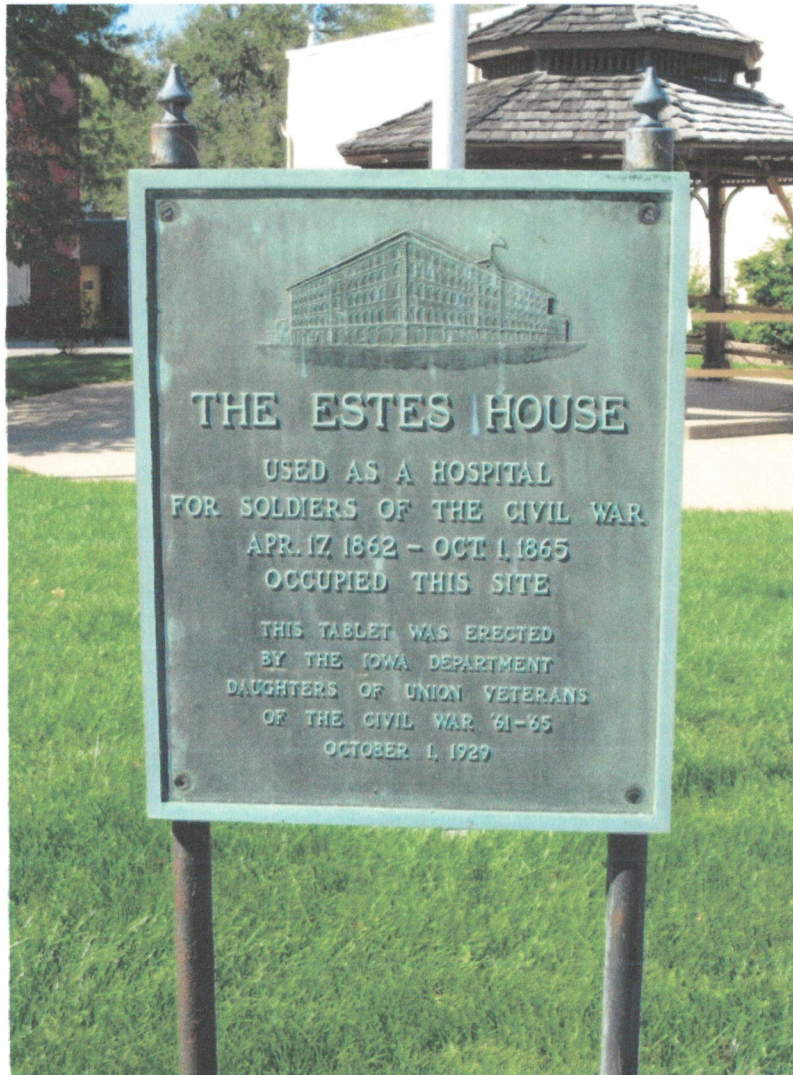
SONS OF UNION VETERANS OF THE CIVIL WAR – CIVIL WAR MEMORIALS COMMITTEE.

Department of Iowa - Civil War Monuments

Lee County - Keokuk

Estes House Plaque and Cornerstone

This plaque is on the spot of Estes House, one of Keokuk's five Civil War hospitals. The plaque was erected by the DUV and dedicated in 1929. It is located in a little park at the corner of 5th and Main Streets in downtown Keokuk. Photo of plaque taken 10/5/20. Thank you to Steve Hanken for sending the photo of the Estes House cornerstone which is located in the Keokuk National Cemetery.



Cornerstone of the
Old Estes House
Fifth & Main
Keokuk Iowa
Site of Army Hospital
Apr 17 1862-Oct. 1, 1865
Erected to the Memory
of the Soldiers who
died in the Old General
Hospital at Keokuk
and are buried in the
National Cemetery