

# colonel borden monument

FORM CWM #61

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## 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:

Col Richard Borden paid for the monument

**Original Dedication Date** 4 Jul 1868 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 Grove Cemetery

798 Prospect GPS Coordinates N41°42'27.04999 W71°8'24.2999"

City/Village &/or Township Fall River

County Bristol State MA Zip Code 02720

The front of the Memorial faces:  North  South  East  West

### Government Body, Agency, or Individual Owner

Name Oak Grove Cemetery - (Caretakers)

Dept./Div. \_\_\_\_\_

Street Address 765 Prospect St

City Fall River State MA Zip Code 02720

Contact Person \_\_\_\_\_ Telephone ( 508 ) 324-2750 ext \_\_\_\_\_

Is Memorial on the National Register of Historic Places  Yes  No ID # if known 83000698  
Cemetery on NRHP since 16 Feb 1983

### 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.) grey granite

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

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

**For Historic Marker or Plaque:**

Material of Plaque or Historical Marker / Tablet = \_\_\_\_\_

**For Cannons with/without monument:**

Material of Cannon = \_\_\_\_\_ Bronze \_\_\_\_\_ Iron \_\_\_\_\_ Type of Cannon (if known) \_\_\_\_\_

See individual cannons for description

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

24 \_\_\_\_\_ Height 6' \_\_\_\_\_ Width \_\_\_\_\_ Depth or overall 20' \_\_\_\_\_ 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)

'None Found

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.

Main: To the Memory of Those Who Fought and Died for the Maintenance of the Union -- Erected by Richard Burden

[163 Men's names are inscribed on the monument who died during the war - See Photos]

**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.

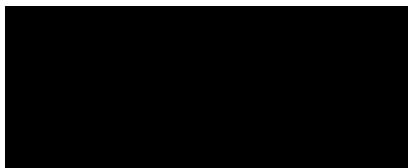
Inspector Identification \_\_\_\_\_ Date of On-site Survey 7/22/2023  
 Your Name Walter Busch  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Telephone (    ) \_\_\_\_\_ E-Mail cwmemorials@suvchw.org

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

US Grant Camp 68 - Missouri Sons of Union Veterans of the Civil War

Please send this completed form to:

Walt Busch, PDC, Chair



Thank you for your help, and attention to detail.

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

**SONS OF UNION VETERANS OF THE CIVIL WAR  
CIVIL WAR MEMORIAL ASSESSMENT FORM  
ADDENDUM – MONUMENT’S CONDITION**

Completion of this form is required when requesting grant money using form CWM-62 *SUVCW Memorial Grant Application Form and Instructions.*

**Condition Information**

**Structural Condition** (check as many as may apply)

The following section applies to Monuments with Sculpture, and Monuments without 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.

	<b>Sculpture</b>	<b>Base</b>
If hollow, is the internal support unstable/exposed? <small>(Look for signs of exterior rust)</small>	_____	_____
Any evidence of structural instability? <small>(Look for cracked joints, missing mortar or caulking or plant growth)</small>	_____	_____ <input checked="" type="checkbox"/>
Any broken or missing parts? <small>(Look for elements (i.e., sword, musket, hands, arms, etc. - missing due to vandalism, fluctuating weather conditions, etc.)</small>	_____	_____
Any cracks, splits, breaks or holes? <small>(Also look for signs of uneven stress &amp; weakness in the material)</small>	_____	_____

**Surface Appearance** (check as many as may apply)

	<b>Sculpture</b>	<b>Base</b>
Black crusting	_____	_____
White crusting	_____	_____
Etched, pitted, or otherwise corroded (on metal)	_____	_____
Metallic staining (run-off from copper, iron, etc.)	_____	_____
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)	_____ <input checked="" type="checkbox"/>	_____ <input checked="" type="checkbox"/>
Other (e.g., spray paint graffiti) - Please describe...	_____	_____
<small>Good Shape, cleaned in 2020. A little mortar around base maybe</small>		

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

Briefly describe the Memorial (affiliation / overall condition & any concern not already touched on) .

Light treatment only with some treatment of base material

Inspector’s Name Walt Busch

Date 7/22/2023

SONS OF UNION VETERANS OF THE CIVIL WAR  
CIVIL WAR MEMORIAL ASSESSMENT FORM  
ADDENDUM – NARRATIVE

[Generally used to record the text of monuments, but may be used for any other useful information, such as if the monument has been moved or if you have information about the day of dedication. May repeat use of page as often as necessary.]

The Memorial is *currently* located at:

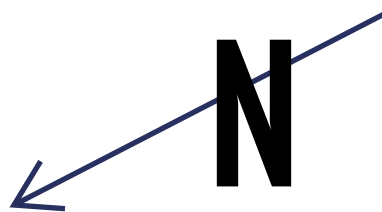
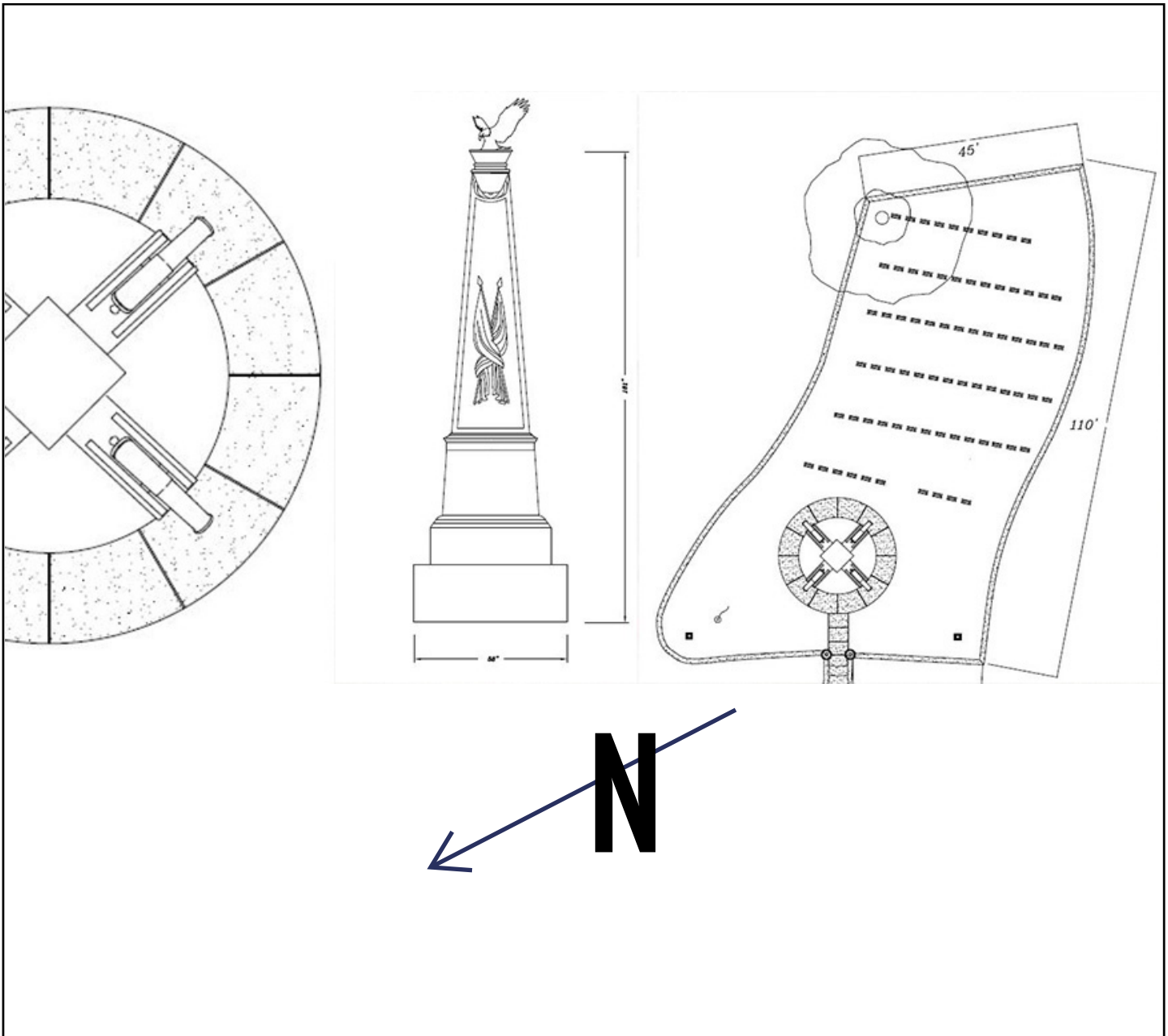
Street/Road address or site location Oak Grove Cemetery

798 Prospect GPS Coordinates N41°42'27.04999 W71°8'24.2999"

City/Village and/or Township Fall River

County Bristol State MA Zip Code 02720

TEXT



**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*]

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 07/22/2023  
Your Name Walt Busch, PDC  
Address 1240 Konert Valley Dr  
City Fenton State MO Zip Code 63026  
Telephone ( ) \_\_\_\_\_ E-Mail cwmemorials@sucvw.org or wbusch@sucwmo.org

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

General Ulysses S Grant Camp 68, MO-SUVCW. Past Commander - Central Region Allied Orders of the GAR

**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@sucvw.org**

*Thank you for your help, and attention to detail.*

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

>This form may be photocopied.<

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SONS OF UNION VETERANS OF THE CIVIL WAR
CIVIL WAR MEMORIAL ASSESSMENT FORM
ADDENDUM – MONUMENT’S CONDITION

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Table with 3 columns: Question, Sculpture, Base. Rows include: If hollow, is the internal support unstable/exposed?; Any evidence of structural instability?; Any broken or missing parts?; Any cracks, splits, breaks or holes?.

Surface Appearance (check as many as may apply)

Table with 3 columns: Question, Sculpture, Base. Rows include: Black crusting; White crusting; Etched, pitted, or otherwise corroded; Metallic staining; Organic growth; Chalky or powdery stone; Granular eroding of stone; Spalling of stone; Droppings; Other (e.g., spray paint graffiti). Includes handwritten note: Granite apparently cleaned around 2022 by Wet & Forget. However, soldiers names are eroding and thought should be eventually given to replacing with metal plaques where the names are.

Does water collect in recessed areas of the Memorial? Yes No [checked] Unable to tell

Surface Coating

Does there appear to be a coating? Yes [checked] No Unable to determine
If known, identify type of coating.
Gilded [checked] Painted Varnished Waxed Unable to determine
Is the coating in good condition? Yes [checked] No Unable to determine

Only Cannons Painted

Basic Surface Condition Assessment (check one)

In your opinion, what is the general appearance or condition of the Memorial?
Well maintained [checked] Would benefit from treatment In urgent need of treatment Unable to determine

Briefly describe the Memorial (affiliation / overall condition & any concern not already touched on) .

Inspector’s Name Walt Busch, PDC Date 7/22/2023



**SONS OF UNION VETERANS OF THE CIVIL WAR  
CIVIL WAR MEMORIAL ASSESSMENT FORM  
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 Street/Road address or site location \_\_\_\_\_  
 \_\_\_\_\_ GPS Coordinates N41°42'26.7999"W71°8'24.16000"  
 City/Village and/or Township Fall River  
 County Bristol State MA Zip Code 02722

**TEXT**

ST CITY or SITE	TYPE & MODEL	FOUNDRY	REG#	INSP	FDY#	YR	WEIGHT	GRVS COMMENTS & NPS#
MA Fall River	24-pdr flank howitzer, M1844	SMCh	95	MS	*220	64	1500	Oak Grove Cemetery, rb's covered
MA Fall River	24-pdr flank howitzer, M1844	SMCh	96	MS	*307	64	1500	Oak Grove Cemetery, rb's covered
MA Fall River	24-pdr flank howitzer, M1844	SMCh	97	MS	*306	64	1503	Oak Grove Cemetery, rb's covered
MA Fall River	24-pdr flank howitzer, M1844	SMCh	100	MS	*230	64	1504	Oak Grove Cemetery, rb's covered

Inspector's Name Walt Busch, PDC Date 7/22/2023  
 ADDENDUM FORM CWM #61 >This form may be photocopied.< ©2007-2023 Sons of Union Veterans of the Civil War, a Corporation



