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## 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.

	- I nank You.		
Type of Memorial			
Monument with Sculpture	Monument with	Cannon	
Monument without Sculpture	X Historical Marker		
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			
X Other: Jasper Co Commissioner			
Original Dedication Date 1894-1895 local paper's article that would have information on the first de	Please consult any/al	I newspaper archives for a	
local paper's article that would have information on the first de	edication ceremony and/or oth	er facts on the memorial.	
Please submit a copy of your findings with full identification o	f the paper & date of publication	on. Thank you.	
Location			
The Memorial is <i>currently</i> located at:	302 So Main N37°10'35 6 V	N/Q <b>∆°18'37</b> 1"	
Street/Road address or site location Courthouse			
City/Village Carthage Township	County _ <sup>Jasper</sup>		
The front of the Memorial faces: X North	South Fa	ast West	
The field of the Memorial 14666.	004111 20	.ot vvoot	
Government Body, Agency, or Individual Owner (	of private cemetery that Mo	emorial is located in)	
Name Jasper County Commission	Dept./Div.	•	
Street Address 302 30 Main			
City Carthage	_ State MO Zip 0	Code 64836	
Contact Person			
If the Memorial has been moved, please list fo	ormer location(s)		
		<del></del>	
Physical Details			
	Xa. Xa		
Material of Monument or base under a Sculpture or Cannon			
If known, name specific material (color of granite,	marbie, etc.)		

_ Cemetery	Park	_ Plaza/Courtyard
"Town Square"	Post Office	School
Municipal Building	State Capitol	Other:
X Courthouse	College Campus	
Traffic Circle	Library	

	urban (residential, r ın / Metropolitan	near city)
Immediate Locale (check as many as may apply)  Industrial <u>X</u> Commercial  Street/Roadside within 20 feet Tree Covered (over the elements (canopy or enclosure, indoor protected from the public (fence or other barrier)  Any other significant environmental factor	rs)	
Condition Information		
<b>Structural Condition</b> (check as many as may apply) The following section applies to Monuments <i>with</i> Sculpture, and Mon	uments without Sculpt	ure -
including the base for Monuments with <i>Cannon</i> . Instability in the so by a number of factors. Indicators may be obvious or subtle. Vibase.		
	Sculpture	Base
If hollow, is the internal support unstable/exposed? (look for signs of exterior rust)	——	
Any evidence of structural instability?  (look for cracked joints, missing mortar or caulking or plant growth)		
Any broken or missing parts?  (look for elements (i.e., sword, musket, hands, arms, etc missing due to vandalism, fluctuating weather conditions, etc.)	_	
Any cracks, splits, breaks or holes? (also look for signs of uneven stress & weakness in the material)		
Surface Appearance (check as many as may apply)		
Black crusting	Sculpture	Base
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) Other (e.g., spray paint graffiti) - Please describe	<del></del>	
Does water collect in recessed areas of the Memorial?	res X No l	Jnable to tell

Surface Coating
Does there appear to be a coating? Yes $\stackrel{\times}{\_\!$
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?  X 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)
<del></del>
Supplemental Background Information
<u>Supplemental Background Information</u> In addition to your on-site survey, any additional information you can provide on the describ
Memorial will be welcomed. Please label each account with its source (author, title, publish
date, pages). Topics include any reference to the points listed on this questionnaire, plus a
previous conservation treatments - or efforts to raise money for treatment. Thank you.
landa and an Island Control
Inspector Identification Data of On site Survey 3/18/2011
Date of On-site Survey 3/18/2011 Your Name Walter E Busch
Address PO Roy 381
State Zip Code _63621 Telephone (314) _630-8407
Claic
Please send this completed form to:
Bruce B. Butgereit, PDC, Chair
1691 Summerfield Street, SE
Grand Rapids, MI 49508-6499
•
(616) 827-3369
civil-war@comcast.net
Thank you for your help, and attention to detail.
SONS OF UNION VETERANS OF THE CIVIL WAR

National Civil War Memorials Committee

