FORM CWM #61

## NATIONAL ORGANIZATION

## SONS OF UNION VETERANS OF THE CIVIL WAR

## CIVIL WAR MEMORIAL ASSESSMENT FORM

PL	EΑ	S	E
----	----	---	---

- 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.

		- Thank You.
Type of Memorial	1	
Monument with Sculpture	Monument with Cal	nnon
Monument without Sculpture	X Historical Marker	Plaque
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: City of Cape Girardeau in conjunction with commun	ity groups	
Original Dedication Date May 6, 2006 local paper's article that would have information on the first Please submit a copy of your findings with full identification of the first please submit a copy of your findings with full identification of the first please submit a copy of your findings with full identification of the first please submit a copy of your findings with full identification of the first please submit a copy of your findings with full identification of the first please submit a copy of your findings with full identification of the first please submit a copy of your findings with full identification of the first please submit a copy of your findings with full identification of the first please submit a copy of your findings with full identification of the first please submit a copy of your findings with full identification of the first please submit a copy of your findings with full identification of the first please submit a copy of your findings with full identification of the first please submit a copy of your findings with full identification of the first please submit a copy of your findings with full identification of the first please submit a copy of your findings with full identification of the first please submit a copy of your findings with full identification of the first please submit a copy of your findings with a copy of your findi		facts on the memorial.
Location The Memorial is <i>currently</i> located at: Street/Road address or site location Fort D Pa	rk, Locust at So. Fort St. W89°31'361	N37°17'26"
City/Village Cape Girardeau Township	County Cape C	Girardeau, MO
The front of the Memorial faces: X North	South East	West
Government Body, Agency, or Individual Owner Name City of Cape Girardeau	(of private cemetery that Memor Dept./Div. Parks & Recreation 1	
Street Address A.C. Brase Arena 410 Kiwanis Drive		
	State MO Zip Code	63701
	Telephone ( 573 ) 335-5	
If the Memorial has been moved, please list f New Historic Marker	iormer location(s)	
Physical Details		
Material of Monument or base under a Sculpture or Cannon	=Stone Concrete X Meta	I Undetermined
If known, name specific material (color of granite,	, marble, etc.)	

Material of the Sculpture = _ If known, name specific material If the Sculpture is of metal, is	al (color of grai	nite, marble, etc.)	Metal not applicable	Undetermined
Material of Plaque or Historic	cal Marker / T	ablet = metal sta	nd with compos	site plastic face
Material of Cannon =Bro Markings on muzzle = N/a				
Markings on Left Trunion Is inert ammunition a part of		Right Tr	union	
Is inert ammunition a part of	the Memorial	? If so, o	describe	
Approximate Dimensions (	indicate unit	of mooning) to	kon from tolla	
Approximate Dimensions ( Monument or Base: Height	4ft Width	24 in Denth	24 in or F	ist / widest points
Monument or Base: Height _ Sculpture: Height _	Width	Depth	or D	Piameter
For Memorials with multiple sheet of paper for each stat each statue and any wear separated from this form). The state of	ue and attact cons/impleme	h to this form.	Please desci	ribe the "pose" of
<b>Markings/Inscriptions</b> (on s Maker or Fabricator mark / na				
The "Dedication Text" is form	ned: cut in	nto material	_ raised up fr	om material face
Record the text (indicate any separ				sheet if necessary. John W. Powell of Illinois.
Later, Powell recruited a comopany of loyal Ca	ape Girardeau men to	serve in the Union army.	Since Powell was fro	om Illinois, these men were
mustered in as Battery F, 2nd Illinois Light	Artillery. [New Parag	raph] After training for	several months, the	battery was sent up the
Tennessee River to Pittsburgh Landing, near a				
command to fire by raising his hand. A bulk				
In 1869, one-armed John Wesley Powell led t	the first successful na	vigation of the Colorado	River through what F	owell named "The Grand
Canyon."				
Courtesy of the Cape Girardeau Convention and	Visitor Bureau and the	City of Cape Girardeau Pa	rks and Recreation De	partment
Environmental Setting (The general vicinity and immediate loc	cale surrounding a	memorial can play a	major role in its o	verall condition.)
Type of Location				
Cemetery	_X Pa		F	Plaza/Courtyard
"Town Square"		ost Office	-	School
Municipal Building		ate Capitol	Other	* ****
Courthouse		ollege Campus	-	
Traffic Circle	Li	brary		

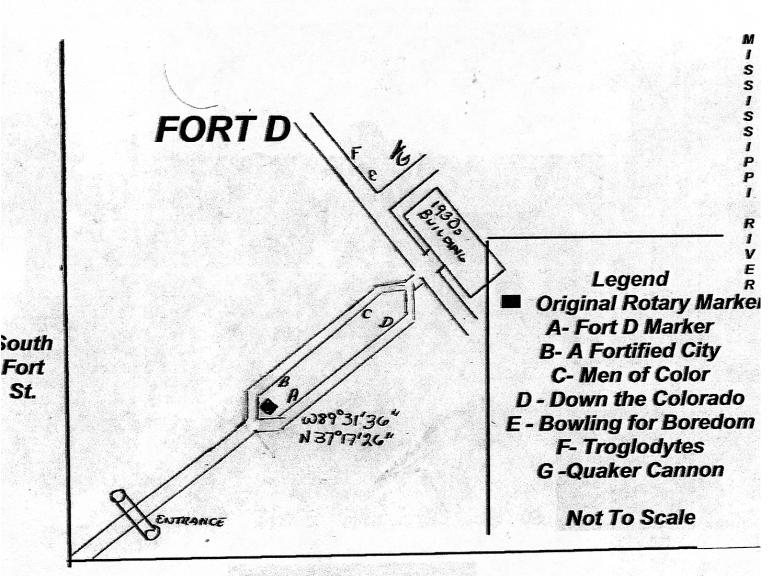
General Vicinity		
Rural (low population, open land) X Town	Suburban (residential, r Urban / Metropolitan	near city)
Immediate Locale (check as many as may apply) Industrial Street/Roadside within 20 feet Protected from the elements (canopy or enclosure protected from the public (fence or other barrier) Any other significant environmental factor	)	jing branches)
	į.	
Condition Information		
<b>Structural Condition</b> (check as many as may apply The following section applies to Monuments with Sculpture including the base for Monuments with Cannon. Instability in the by a number of factors. Indicators may be obvious or subtle base.	ire, and Monuments <u>withou</u> the sculpture and its base ca	an be detected
	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	) Sculpture	Base
Black crusting		
White crusting		-
Etched, pitted, or otherwise corroded (on metal)	and the second second	-
Metallic staining (run-off from copper, iron, etc.)		-
Organic growth (moss, algae, lichen or vines)		
Chalky or powdery stone		
Granular eroding of stone		4-december of
Spalling of stone (surface splitting off)	400-00-00-0	-
Droppings (bird, animal, insect remains) Other (e.g., spray paint graffiti) - Please describe		
The marker is new as of 2006		
Does water collect in recessed areas of the Memorial?	Yes _X_NoU	Inable to tell

Surface Coating
Does there appear to be a coating? Yes _X No Unable to determin
If known, identify type of coating
Gilded Painted Varnished Waxed Unable to determin
Gilded Painted Varnished Waxed Unable to determine the coating in good condition? Yes No Unable to determine
Basic Surface Condition Assessment (check one)
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).
Reinspection in 5 years will tell whether this historic marker will need maintainece
Supplemental Background Information
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.
Inspector Identification
Date of On-site Survey 19 June 2006
Your Name Walter E Busch, Commander, US Grant Camp #68, Dept of Missouri
Address PO Box 509 City Pilot Knob
State MO Zip Code 63663 Telephone ( 314 ) 630-8407
Please send this completed form to:
Todd A Shillington PDC

15 Park Place Holley, NY 14470-1022 (585) 638-5929

Thank you for your help, and attention to detail.

Sons of Union Veterans of the Civil War National Civil War Memorials Committee



LOCUST ST - CAPE GIRARDEAU MO

Untitled 1 Page 1 of 1

