



MISSOURI DEPARTMENT OF NATURAL RESOURCES  
 DIVISION OF STATE PARKS  
**CEMETERY MARKER SURVEY FORM (PAGE 1 OF 3)**

FOR SHPO STAFF USE ONLY		
STAFF REVIEWER	DATE ENTERED IN INVENTORY	ADDITIONAL RESEARCH NEEDED? <input type="checkbox"/> YES <input type="checkbox"/> NO
ELIGIBILITY STATUS	<input type="checkbox"/> ELIGIBLE (INDIVIDUALLY) <input type="checkbox"/> NOT ELIGIBLE	<input type="checkbox"/> ELIGIBLE (DISTRICT) <input type="checkbox"/> NOT DETERMINED

**CEMETERY INFORMATION**

1. SURVEY NUMBER -CS- -		2. SURVEY NAME		
3. COUNTY		4. ADDRESS OR DIRECTIONS FROM NEAREST COMMUNITY OR INTERSECTION		
5. CITY & ZIP CODE		<input type="checkbox"/> VICINITY	6. GPS COORDINATES UTM:	OR LATITUDE LONGITUDE
8. HISTORIC NAME (IF KNOWN)		9. CURRENT/OTHER NAME (IF KNOWN)		
10. OWNERSHIP <input type="checkbox"/> PRIVATE <input type="checkbox"/> PUBLIC		11. PUBLIC ACCESSIBILITY <input type="checkbox"/> UNRESTRICTED <input type="checkbox"/> LIMITED HOURS <input type="checkbox"/> BY PERMISSION <input type="checkbox"/> INACCESSIBLE		12. ACCESSIBLE BY <input type="checkbox"/> FOOT <input type="checkbox"/> AUTO <input type="checkbox"/> INACCESSIBLE <input type="checkbox"/> OTHER

**MARKER CHARACTERISTICS AND INSCRIPTIONS**

13. NAME(S) ON MARKER (LAST, FIRST, MIDDLE). INCLUDE DATES OF BIRTH AND DEATH IF INSCRIBED ON MARKER.		14. INSCRIPTION/EPITAPH (FULL ALL SIDES). FOR ADDITIONAL INFORMATION USE BOX 37.	
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15. BURIAL TYPE <input type="checkbox"/> Individual <input type="checkbox"/> Mausoleum <input type="checkbox"/> Columbarium <input type="checkbox"/> Family <input type="checkbox"/> Receiving vault <input type="checkbox"/> Other:		16. SURFACE FINISH <input type="checkbox"/> Polished <input type="checkbox"/> Rusticated <input type="checkbox"/> Other: _____ <input type="checkbox"/> Rough cut <input type="checkbox"/> Smooth		17. ORIENTATION (MARKER FACES) <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> NW <input type="checkbox"/> SW	
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18. DESCRIBE LOCATION OF MARKER IN CEMETERY (I.E. LOT AND SECTION NUMBER OR GENERAL VICINITY):		19. MATERIALS FROM WHICH MARKER IS MADE <input type="checkbox"/> Metal <input type="checkbox"/> Bronze <input type="checkbox"/> Stone <input type="checkbox"/> Granite <input type="checkbox"/> Concrete <input type="checkbox"/> Iron <input type="checkbox"/> Marble <input type="checkbox"/> Wood <input type="checkbox"/> Zinc <input type="checkbox"/> Slate <input type="checkbox"/> Other:	
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20. MARKER/MONUMENT TYPE <input type="checkbox"/> Other: _____							
<input type="checkbox"/> Headstone 	<input type="checkbox"/> Die on Base 	<input type="checkbox"/> Lawn Marker 	<input type="checkbox"/> Pulpit 	<input type="checkbox"/> Tomb Vaulted Pedestal 	<input type="checkbox"/> Box Tomb 	<input type="checkbox"/> Ledger/Slab 	<input type="checkbox"/> Mausoleum 
<input type="checkbox"/> Die in Socket 	<input type="checkbox"/> Raised Top 	<input type="checkbox"/> Plaque 	<input type="checkbox"/> Die, Base & Cap 	<input type="checkbox"/> Obelisk 	<input type="checkbox"/> Table Tomb 	<input type="checkbox"/> Bedstead 	<input type="checkbox"/> Columbarium 

21. DECORATIVE CARVINGS AND SCULPTURAL FORMS FOUND ON MARKER <input type="checkbox"/> None <input type="checkbox"/> Hands <input type="checkbox"/> Eastern Star <input type="checkbox"/> Angel <input type="checkbox"/> Plant/flower <input type="checkbox"/> Oddfellows <input type="checkbox"/> Religious <input type="checkbox"/> Bird <input type="checkbox"/> Shriners <input type="checkbox"/> Lamb <input type="checkbox"/> Anchor <input type="checkbox"/> Woodsman <input type="checkbox"/> Drapery <input type="checkbox"/> Crown <input type="checkbox"/> Military <input type="checkbox"/> Urn <input type="checkbox"/> Statuary <input type="checkbox"/> Acronym: _____ <input type="checkbox"/> Architectural forms <input type="checkbox"/> Book <input type="checkbox"/> Other: _____ <input type="checkbox"/> Gates <input type="checkbox"/> Mason		22. CARVED SURFACE <input type="checkbox"/> None <input type="checkbox"/> Front <input type="checkbox"/> Back <input type="checkbox"/> Top <input type="checkbox"/> Side panels <input type="checkbox"/> Other: _____		23. CONDITION OF CARVINGS/INSCRIPTIONS <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Mostly readable <input type="checkbox"/> Illegible <input type="checkbox"/> Underground <input type="checkbox"/> Other: _____		24. ASSOCIATED OBJECTS <input type="checkbox"/> None <input type="checkbox"/> Vase <input type="checkbox"/> Curbing <input type="checkbox"/> Lawn stake <input type="checkbox"/> Fencing <input type="checkbox"/> Medallion Stake <input type="checkbox"/> Footstone <input type="checkbox"/> Urns/ Flower pots <input type="checkbox"/> Flag <input type="checkbox"/> Other: _____ <input type="checkbox"/> Pottery <input type="checkbox"/> Personal Effects	
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25A. ENDANGERED: <input type="checkbox"/> YES <input type="checkbox"/> NO		26. APPROXIMATE PERCENT DAMAGED <input type="checkbox"/> None <input type="checkbox"/> 50% <input type="checkbox"/> 5% <input type="checkbox"/> 75% <input type="checkbox"/> 10% <input type="checkbox"/> 100% <input type="checkbox"/> 25%		27A. HAVE REPAIRS BEEN ATTEMPTED? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN		28. PLOT VEGETATIVE LANDSCAPE FEATURES <input type="checkbox"/> None <input type="checkbox"/> Trees <input type="checkbox"/> Stains <input type="checkbox"/> Bushes <input type="checkbox"/> Graffiti <input type="checkbox"/> Flowers <input type="checkbox"/> Vandalism <input type="checkbox"/> Unknown <input type="checkbox"/> Biological activity <input type="checkbox"/> Other: _____ <input type="checkbox"/> Erosion <input type="checkbox"/> Open joints	
25B. ENDANGERED BY: <input type="checkbox"/> Soiling <input type="checkbox"/> Vegetation <input type="checkbox"/> Fragmented <input type="checkbox"/> Stains <input type="checkbox"/> Development <input type="checkbox"/> Powdering <input type="checkbox"/> Graffiti <input type="checkbox"/> Tilted/Sunken <input type="checkbox"/> Blistering/Flaking/Scaling <input type="checkbox"/> Vandalism <input type="checkbox"/> Cracked <input type="checkbox"/> Other: <input type="checkbox"/> Biological activity <input type="checkbox"/> Fallen <input type="checkbox"/> Erosion <input type="checkbox"/> Open joints				27B. REPAIR METHODS USED <input type="checkbox"/> None <input type="checkbox"/> Iron pins/Bolts <input type="checkbox"/> Adhesives <input type="checkbox"/> Reset <input type="checkbox"/> Metal supports <input type="checkbox"/> Unknown <input type="checkbox"/> Coatings <input type="checkbox"/> Other: <input type="checkbox"/> Replacement			

**HISTORICAL DATA**

29. ARCHITECT/DESIGNER/ARTIST		30. BUILDER OR MONUMENT COMPANY	
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31A. <input type="checkbox"/> Previously Surveyed? <input type="checkbox"/> National Register Listed?		31B. SURVEY OR NOMINATION NAME	
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**CEMETERY MARKER SURVEY FORM (PAGE 2 OF 3)**

**OTHER**

32A. CONTACT FOR CEMETERY (NAME AND CONTACT INFORMATION)	32B. OWNER INFORMATION (NAME AND CONTACT INFORMATION)
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33. FORM PREPARED BY (NAME AND ORGANIZATION)

34. CONTACT IS: <input type="checkbox"/> OWNER <input type="checkbox"/> MANAGER <input type="checkbox"/> CEMETERY BOARD MEMBER <input type="checkbox"/> OTHER	34B.: <input type="checkbox"/> CONTACT FOR ACCESS	35. SURVEY DATE	36. DATE OF REVISIONS
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**ADDITIONAL INFORMATION**

37. HISTORY, BIOGRAPHICAL AND/OR LANDSCAPE INFORMATION

38. SOURCES OF INFORMATION

39. MARKER/MONUMENT SKETCH	40. PLOT SKETCH DRAWN ROUGHLY TO SCALE. Note important features such as fences, gates, monuments, markers, and landscaping. This plot sketch must have a north arrow.
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Submission must include photograph(s) depicting the existing conditions of the monument and a site plan of the cemetery attached. Photographs must be labeled with the date, photographer name, camera direction, and cemetery name and/or location. Site plan should be a map or aerial photograph which is roughly to scale, has a north arrow, and marks the location of this marker within the cemetery.



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**CEMETERY MARKER SURVEY FORM (PAGE 3 OF 3)**

41. PHOTO DIRECTION AND ADDITIONAL DESCRIPTION

42. PHOTO DIRECTION AND ADDITIONAL DESCRIPTION

43. PHOTO DIRECTION AND ADDITIONAL DESCRIPTION

44. PHOTO DIRECTION AND ADDITIONAL DESCRIPTION