Marker Inventory Form

CEMETERY: _____ **ROW#**_____ **PLOT#**_____

Family Name_____ **Name(s) on Marker**_____

_____

Marker Type:

Tablet Block Shaft Cylinder Slant Flush Other_____

Marker Material:

Marble Granite Sandstone Bronze Zinc Wood Other_____

Base Type:

Base Foundation Plinth and Base Plinth, Base, and Foundation None

Base Material:

Sandstone Marble Granite Concrete Basalt Other_____

Marker Condition:

Broken? Yes No # Pieces____ Detached from base? Yes No Spalling? Yes No

Headstone loose? Yes No Leaning? Yes No Inclination degrees_____

Sunken? Yes No Condition Description_____

Epitaph Information: *(Transcribe the epitaph from each face and note direction of each face.)*

_____
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_____

Photo Numbers:_____

Date Surveyed:_____

Surveyor:_____

Relevel: Yes No

Reset: Yes No

Repair: Yes No

Cleaning: Light Medium Heavy No

Priority: Low Medium High