

GRAVESTONE RECORDING FORM

Graveyard Ref: Fortingall

Memorial Ref: A5

Other Refs (include details of earlier surveys):

Surveyor (include group if applicable): Fortingall Roots (FD and EB)

Date: 21 August 2013

PART 1: Situation

1. MEMORIAL EXPOSURE: Not enclosed Enclosed by a structure Built into a wall 2. EXPOSED FACES: All N S E W U(pward) None

3. LAND TYPES AND FEATURES AROUND THE MEMORIAL:

Include all features / land types within 5m of a memorial - even if these fall outside the graveyard itself, tick box to show direction and distance

| | within 5 metres | within 1 metre | touching |
|----------------------------------|--|--|---|
| Grassed Surface | <input type="checkbox"/> N <input type="checkbox"/> S <input checked="" type="checkbox"/> E <input checked="" type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input checked="" type="checkbox"/> E <input checked="" type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All |
| Shrubs / Flower Beds | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All |
| Exposed soil | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> E <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> All |
| Other Memorial(s) | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All |
| Church / Chapel | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All |
| Graveyard Path | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All |
| Graveyard Entrance | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All |
| Graveyard Dyke | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input checked="" type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All |
| Burial Enclosure: Walled | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All |
| Other enclosure e.g. railed | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All |
| Public Road / Footpath | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All |
| Other Feature / Land Use - state | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All |

Other Feature / Land Use - state

| | | | |
|--------------------------|---|--|---|
| | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All |
| Trees – memorial is | under the canopy <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | within 1 metre of trunk <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | touching trunk <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All |
| Embankment - memorial is | at top of slope <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | on slope <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All | at bottom of slope <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All |

4. ORIENTATION OF MAJOR FACE:

N S E W Up Downward / Fallen over

PART 2: Material & Design

5. SUMMARY OF MATERIALS USED:

Memorial made entirely from stone(s) fill out 6; Memorial made from stone and another material fill out 6 & 7; Memorial made entirely from a material other than stone fill out 7

6. STONE TYPE

Please describe different coloured examples of the same stone type as separately (e.g. red granite and black granite)

STONE 1 (MAIN)

Colour: not recorded

Sandstone

Marble

Granite

Slate

Other – state

STONE 2 (SECONDARY)

Colour: not recorded

Sandstone

Marble

Granite

Slate

Other – state

ANY OTHER STONES USED

Colour:

Sandstone

Marble

Granite

Slate

Other – state

7. OTHER MATERIAL(S)
 please note any other materials used to make or decoration the memorial. Do not include materials used for letting (see question 8)

Iron Bronze Brick Artificial stone Concrete Photograph
 Porcelain Terracotta Ceramic tiles Wood Other state

Briefly describe, if necessary use the continuation sheet

8. OTHER MATERIALS USED FOR LETTERING: Lead lettering Other Gold paint

9. INSCRIPTION TECHNIQUE: Inscribed Inlaid Relief Other state

10. HAS THE MEMORIAL'S SURFACE BEEN PAINTED? No Yes please note current coverage
 Total coverage Paint partially worn away Only traces of paint remain

11. NUMBER OF STONE BLOCKS USED TO MAKE THE MEMORIAL: Do not include foundations or count individual fragments resulting from breakage
 1 2 3-4 5-10 More than 10

12. MEMORIAL DIMENSIONS provide an estimate if access is difficult
 Height (cm): 157 Width (cm): 82 / 69 / 56 Depth (cm): 33 / 20 / 12

13. ARE THE MEMORIALS FOUNDATIONS VISIBLE? No Yes please note material(s)
 Brick Concrete Stone Other state

14. MEMORIAL CLASS:
 Obelisk Wall monument Ledger / flat Stone Headstone
 Free standing Cross Sculpture Chest tomb Other tomb state
 Other memorial state

15. ASSOCIATED FEATURES OR COMPONENTS is the memorial associated with any graveyard features or monumental components (e.g. railings, kerbstones, burial enclosures, burial vaults, burial aisles, gateway, mortsafes, mausoleums) No Yes - briefly describe if necessary use the continuation sheet

16. DOES THE MEMORIAL BEAR ANY SCULPTURE OR SYMBOLS? No Yes
 Ivy leaves in curved panel at top
 'Corinthian' column down the sides
 Ivy leaf curlicues at bottom

PART 3: Memorial Inscription

17. INSCRIPTION EXTENT: Memorial fallen over downward face not visible
 tick appropriate box for all faces

| | | | | | |
|--|----------------------------|----------------------------|---------------------------------------|----------------------------|-----------------------------|
| Face never inscribed | N <input type="checkbox"/> | S <input type="checkbox"/> | E <input type="checkbox"/> | W <input type="checkbox"/> | Up <input type="checkbox"/> |
| Inscribed area no longer discernible / destroyed | N <input type="checkbox"/> | S <input type="checkbox"/> | E <input type="checkbox"/> | W <input type="checkbox"/> | Up <input type="checkbox"/> |
| Less than ¼ of the total surface area covered by the inscription | N <input type="checkbox"/> | S <input type="checkbox"/> | E <input type="checkbox"/> | W <input type="checkbox"/> | Up <input type="checkbox"/> |
| More than ½ of the total surface area covered by the inscription | N <input type="checkbox"/> | S <input type="checkbox"/> | E <input checked="" type="checkbox"/> | W <input type="checkbox"/> | Up <input type="checkbox"/> |


18. IS THERE A STONEMASON'S NAME ON THE MEMORIAL? No Yes please state(using the same format as on the memorial)
 Beveridge Perth

17. INSCRIPTION TRANSCRIPT:

Location: please note which face is being transcribed [N, S, E, W or U(pwards)]. When more than one inscription panel exists on the same face note panel number and where necessary refer to a sketch drawing.

Transcript: Adhere to the same layout as found on the memorial, note any area where the inscription is obscured / lost with a dashed line. Remember to include any stonemason's signatures. If necessary use a continuation sheet.

| Location | Transcript |
|----------|--|
| | |
| | IN LOVING MEMORY |
| | OF |
| | ARCHIBALD CAMPBELL |
| | WHO DIED AT INCHGARTH |
| | 16 TH APRIL 1902 AGED 86 |
| | AND HIS WIFE |
| | CHRISTINA CAMPBELL |
| | DIED 7 TH FEBY 1908 AGED 97 |
| | AND OF THEIR SON |
| | JOHN |
| | WHO DIED 9 TH JULY 1911 AGED 64 |
| | ALSO THEIR DAUGHTER |
| | CHRISTINA CAMPBELL |
| | WHO DIED AT WESTER BLAIRISH |
| | 4 TH SEPT 1937 AGED 84 |
| | AND THEIR SON |
| | JAMES |
| | DIED 9 TH JULY 1946 AGED 89 |
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|--|--|
|  <p> 56 14 Y LEAVES IN LOVING MEMORY OF ARCHIBALD CAMPBELL WHO DIED AT INCHMARNOCH 10TH APRIL 1902 AGED 86 AND HIS WIFE CHRISTINA CAMPBELL DIED 7TH FEBY 1909 AGED 97 AND OF THEIR SON JOHN WHO DIED 9TH JOHN 1911 AGED 60 ALSO THEIR DAUGHTER CHRISTINA CAMPBELL WHO DIED AT WESTER BARRACH 4TH SEPT 1878 AGED 24 AND THEIR SON JAMES DIED 4TH JULY 1866 AGED 29 56 69 82 57 </p> | |
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