

GRAVESTONE RECORDING FORM

Graveyard Ref: Fortingall

Memorial Ref: A18

Other Refs (include details of earlier surveys):

Surveyor (include group if applicable): Fortingall Roots (not recorded)

Date: 22 August 2013

PART 1: Situation1. **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 type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All	<input checked="" 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 checked="" type="checkbox"/> N <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> E <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> All	<input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input 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 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
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 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	<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 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

	within 5 metres	within 1 metre	touching
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: White - blackened

Sandstone Marble Granite Slate

Other – state

STONE 2 (SECONDARY)

Colour: White - blackened

Sandstone Marble Granite Slate

Other – state

ANY OTHER STONES USED

Colour: not recorded

Sandstone Marble Granite Slate

Other – state

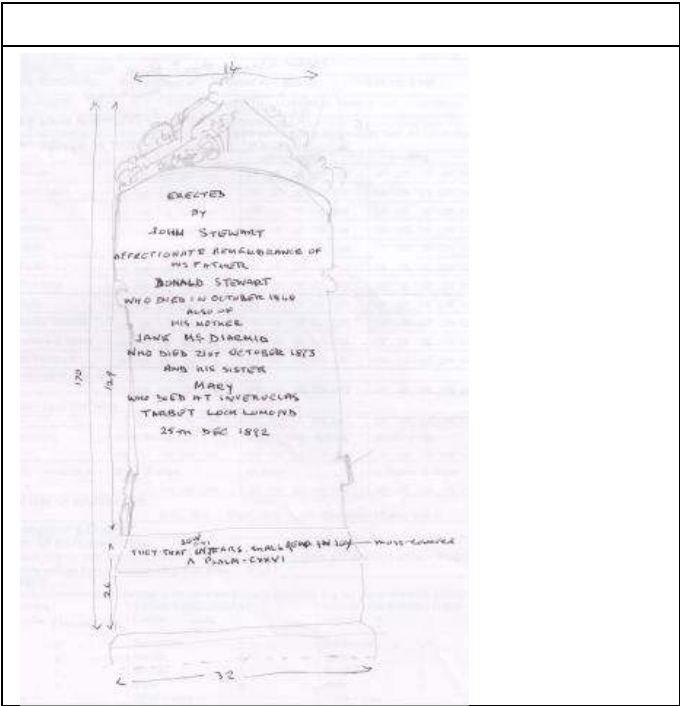
7. OTHER MATERIAL(S) please note any other materials used to make or decoration the memorial. Do not include materials used for letting (see question 8) Iron <input type="checkbox"/> Bronze <input type="checkbox"/> Brick <input type="checkbox"/> Artificial stone <input type="checkbox"/> Concrete <input type="checkbox"/> Photograph <input type="checkbox"/> Porcelain <input type="checkbox"/> Terracotta <input type="checkbox"/> Ceramic tiles <input type="checkbox"/> Wood <input type="checkbox"/> Other <input type="checkbox"/> state <i>Briefly describe, if necessary use the continuation sheet</i>					
8. OTHER MATERIALS USED FOR LETTERING: Lead lettering <input type="checkbox"/> Other <input type="checkbox"/> state					
9. INSCRIPTION TECHNIQUE: Inscribed <input checked="" type="checkbox"/> Inlaid <input type="checkbox"/> Relief <input type="checkbox"/> Other <input type="checkbox"/> state					
10. HAS THE MEMORIAL'S SURFACE BEEN PAINTED? No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> <i>please note current coverage</i> Total coverage <input type="checkbox"/> Paint partially worn away <input type="checkbox"/> Only traces of paint remain <input type="checkbox"/>					
11. NUMBER OF STONE BLOCKS USED TO MAKE THE MEMORIAL: Do not include foundations or count individual fragments resulting from breakage 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3-4 <input checked="" type="checkbox"/> 5-10 <input type="checkbox"/> More than 10 <input type="checkbox"/>					
12. MEMORIAL DIMENSIONS <i>provide an estimate if access is difficult</i> Height (cm): 170 / 129.5 / 26 Width (cm): 71 / 66 / 60 / 58 Depth (cm): 32 / 24 / 14					
13. ARE THE MEMORIALS FOUNDATIONS VISIBLE? No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> <i>please note material(s)</i> Brick <input type="checkbox"/> Concrete <input type="checkbox"/> Stone <input type="checkbox"/> Other <input type="checkbox"/> state					
14. MEMORIAL CLASS: Obelisk <input type="checkbox"/> Wall monument <input type="checkbox"/> Ledger / flat Stone <input type="checkbox"/> Headstone <input checked="" type="checkbox"/> Free standing Cross <input type="checkbox"/> Sculpture <input type="checkbox"/> Chest tomb <input type="checkbox"/> Other tomb <input type="checkbox"/> state Other memorial <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> - <i>briefly describe if necessary use the continuation sheet</i> Leaning against East Face of A18, Tablet 15 high by 22 wide Black Tree image in bronze Script inlaid with gold IRVINE JOHN STEWART 1908-1894					
16. DOES THE MEMORIAL BEAR ANY SCULPTURE OR SYMBOLS? No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Imaginative fronds in false relief, forming rolls from front to back of depth of stone					
PART 3: Memorial Inscription					
17. INSCRIPTION EXTENT: Memorial fallen over downward face not visible <input type="checkbox"/> 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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> <i>please state(using the same format as on the memorial)</i>					

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
	ERECTED
	BY
	JOHN STEWART
	AFFECTIONATE REMEMBRANCE OF
	HIS FATHER
	DONALD STEWART
	WHO DIED IN OCTOBER 1848
	ALSO OF
	HIS MOTHER
	JANE M ^C DIARMID
	WHO DIED 21 ST OCTOBER 1873
	AND HIS SISTER
	MARY
	WHO DIED AT INVERGLAS
	TARBET LOCH LOMOND
	25 TH DEC 1892
	THEY THAT SOW IN TEARS REAP IN JOY
	PSALM - CXXVI
	[separate tablet]
	IRVINE
	JOHN STEWART
	1908-1894



Leaning against E face of A18

heavier - heavy stone? black
 tree bronze
 script inlaid with gold
 2 feet of script

