

**GRAVESTONE RECORDING FORM**

Graveyard Ref: Fortingall

Memorial Ref: B25

Other Refs (include details of earlier surveys):

Surveyor (include group if applicable): Fortingall Roots (NH and CB)

Date: Not recorded

**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 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
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 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 checked="" 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 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	<b>under the canopy</b> <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All	<b>within 1 metre of trunk</b> <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All	<b>touching trunk</b> <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All
Embankment - memorial is	<b>at top of slope</b> <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All	<b>on slope</b> <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> All	<b>at bottom of slope</b> <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: Black / grey

Sandstone Marble Granite - polished Slate 

Other – state

STONE 2 (SECONDARY)

Colour: Black / grey

Sandstone Marble Granite Slate 

Other – state

ANY OTHER STONES USED

Colour: Grey

Sandstone Marble Granite Slate 

Other – state

<b>7. OTHER MATERIAL(S)</b> 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>					
<b>8. OTHER MATERIALS USED FOR LETTERING:</b> Lead lettering <input type="checkbox"/> Other <input checked="" type="checkbox"/> Gold paint					
<b>9. INSCRIPTION TECHNIQUE:</b> Inscribed <input checked="" type="checkbox"/> Inlaid <input type="checkbox"/> Relief <input type="checkbox"/> Other <input type="checkbox"/> state					
<b>10. HAS THE MEMORIAL'S SURFACE BEEN PAINTED?</b> 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"/>					
<b>11. NUMBER OF STONE BLOCKS USED TO MAKE THE MEMORIAL:</b> 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"/>					
<b>12. MEMORIAL DIMENSIONS</b> <i>provide an estimate if access is difficult (Base 18 – 26)</i> Height (cm): 172    Width (cm): 61 / 52    Depth (cm): 14					
<b>13. ARE THE MEMORIALS FOUNDATIONS VISIBLE?</b> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> <i>please note material(s)</i> Brick <input type="checkbox"/> Concrete <input checked="" type="checkbox"/> Stone <input type="checkbox"/> Other <input type="checkbox"/> state					
<b>14. MEMORIAL CLASS:</b> 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					
<b>15. ASSOCIATED FEATURES OR COMPONENTS</b> 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> - <i>briefly describe if necessary use the continuation sheet</i>					
<b>16. DOES THE MEMORIAL BEAR ANY SCULPTURE OR SYMBOLS?</b> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/>  Shield, scroll, ivy at top and ivy border					
<b>PART 3: Memorial Inscription</b>					
<b>17. INSCRIPTION EXTENT:</b> 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"/>
<b>18. IS THERE A STONEMASON'S NAME ON THE MEMORIAL?</b> 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
	SACRED
	TO THE MEMORY
	OF
	HUGH ROBERTSON
	WHO DIED AT BALLINTYRE, GLENLYON
	23 <sup>RD</sup> OCTOBER 1917 AGED [?] YEARS
	ALSO HIS WIFE
	ELIZABETH M <sup>C</sup> DOUGALL
	WHO DIED AT BALLINTYRE
	16 <sup>TH</sup> JULY 1919 AGED 64 YEARS
	ALSO THEIR SONS
	DUNCAN ROBERTSON
	DIED NOVEMBER 1913 AGED 38 YEARS
	JOHN ROBERTSON
	DIED SEPTEMBER 1953 AGED 75 YEARS
	HUGH ROBERTSON
	DIED FEBRUARY 1972 AGED 82
	AND THEIR DAUGHTERS
	CHRISTINA ANDERSON
	ROBERTSON
	DIED SEPTEMBER 1960 AGED 84 YEARS
	ELIZABETH ROBERTSON [?]
	DIED OCTOBER 1977
	AGED 90 YEARS [?]
	REST IN PEACE
	ERECTED BY THEIR FAMILY

<p>SACRED TO THE MEMORY OF HUGH ROBERTSON WHO DIED AT BALLINTEE GREENHAW 23 OCTOBER 1917 AGED 64 YEARS AND HIS WIFE ELIZABETH M. DODDALL WHO DIED AT BALLINTEE 18th JULY 1919 AGED 64 YEARS ALSO THEIR SONS JAMES ROBERTSON DIED NOVEMBER 1915 AGED 31 YEARS JOHN ROBERTSON DIED JETTYMORE 1913 AGED 75 YEARS HUGH ROBERTSON DIED FEBRUARY 1912 AGED 82 AND THEIR DAUGHTERS CHRISTINA ANDERSON ROBERTSON DIED SEPTEMBER 1916 AGED 54 YEARS ELIZABETH ROBERTSON DIED OCTOBER 1917 AGED 50 YEARS REST IN PERCE</p> <p>ERECTED BY THEIR FAMILY</p>	