

GRAVESTONE RECORDING FORM: INCORPORATING CONDITION SURVEY

Graveyard Ref: _____ Memorial Ref: _____

Other Refs (include details of earlier surveys): _____

Surveyor (include group if applicable): _____

Date: _____

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 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 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 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*N S E W AllN S E W AllN S E W AllOther Feature / Land Use - *state*N S E W AllN S E W AllN S E W All

Trees – memorial is

under the canopy**within 1 metre of trunk****touching trunk**N S E W AllN S E W AllN S E W All

Embankment - memorial is

at top of slope**on slope****at bottom of slope**N S E W AllN S E W AllN S E W All**4. ORIENTATION OF MAJOR FACE:** N S E W U 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**

STONE TYPE 1 (MAIN)	BEDDING PLANES / LAYERS	INCLUSIONS AND VEINS.
Sandstone <input type="checkbox"/>	Not Visible <input type="checkbox"/> Visible as: Horizontal layers <input type="checkbox"/> Vertical layers <input type="checkbox"/> Diagonal layers <input type="checkbox"/> Rippled layers <input type="checkbox"/>	Not visible <input type="checkbox"/> Visible as: Pebbles <input type="checkbox"/> Mineral Deposits <input type="checkbox"/> Veins <input type="checkbox"/> Fossils <input type="checkbox"/> <i>please note size, frequency and if known type of mineral present</i>
Marble <input type="checkbox"/>		
Granite <input type="checkbox"/>		
Slate <input type="checkbox"/>		
Other – <i>state</i>		
Colour:		
STONE TYPE 2 (SECONDARY)	BEDDING PLANES / LAYERS	INCLUSIONS AND VEINS
Type - <i>state</i>	Not visible <input type="checkbox"/> Visible <input type="checkbox"/> <i>state</i>	Not visible <input type="checkbox"/> Visible <input type="checkbox"/> <i>state</i>
Colour:		
STONE TYPE 3 (OTHER)	BEDDING PLANES / LAYERS	INCLUSIONS AND VEINS
Type - <i>state</i>	Not visible <input type="checkbox"/> Visible <input type="checkbox"/> <i>state</i>	Not visible <input type="checkbox"/> Visible <input type="checkbox"/> <i>state</i>
Colour:		

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
 Porcelain Terracotta Ceramic tiles Wood Photograph
 Other *state*

Briefly describe, if necessary use a continuation sheet (See Part 7)

8. OTHER MATERIALS USED FOR LETTERING: Lead lettering Other *state*

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): width (cm): depth (cm):

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

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

15. DOES THE MEMORIAL BEAR ANY SCULPTURE OR SYMBOLS? No Yes *briefly describe, noting if carving is relief or inscribe Where necessary use a continuation sheet to sketch carvings.* (See Part 7)

PART 3: Memorial Inscription

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

Face never inscribed	N <input type="checkbox"/>	S <input type="checkbox"/>	E <input type="checkbox"/>	W <input type="checkbox"/>	U <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"/>	U <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"/>	U <input type="checkbox"/>
Less than ½ 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"/>	U <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 type="checkbox"/>	W <input type="checkbox"/>	U <input type="checkbox"/>

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 (See Part 7)

		(See Part 7)
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GRAVESTONE RECORDING FORM: INCLUDING CONDITION SURVEY

Graveyard Ref:

Memorial Ref:

PART 4: Condition: General Damage, Plants, Animals and People.

18. MOVEMENT: Has the memorial *If relevant describe movement in more detail, noting any evidence as to why this may have occurred*

sunk or become buried? No Yes

collapsed or fallen over? No Yes

been repositioned? No Yes

Is the memorial leaning? No Yes

19. BREAKAGE: Is the stone currently broken? No *go onto the next section* Yes *fill in the section below*

Have the upper parts of the memorial become separated from the base? No Yes

Has decorative carving been lost from the stone? No Yes

Have elements, such as panels, finials or columns, become detached? No Yes

Has other breakage occurred? No Yes *state*

If relevant describe breakage in more detail, noting any evidence as to why this may have occurred

20. IS THE MEMORIAL CHIPPED OR SCRATCHED? No Yes *If relevant describe damage in more detail, noting any evidence as to why this may have occurred*

21. REPAIRS, CLEANING AND RE-USE*Please describe repairs, cleaning or re-use in more detail, noting any evidence as to why this may have occurred*

Has the memorial been:

Re-used? No Yes Cleaned? No Yes Repaired? No Yes

Please indicate any material(s) used for repairs:

Stone Concrete Iron Steel Lead Resin Cement mortar Lime mortar Other *state***22. VEGETATION:** tick the relevant box below to show presence and the extent of vegetation.

	LICHEN					ALGAE					MOSS					IVY					OTHER PLANTS				
	Not present <input type="checkbox"/>					Not present <input type="checkbox"/>					Not present <input type="checkbox"/>					Not present <input type="checkbox"/>					Not present <input type="checkbox"/>				
LOCATION	N	S	E	W	U	N	S	E	W	U	N	S	E	W	U	N	S	E	W	U	N	S	E	W	U
Top 1/3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Middle 1/3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bottom 1/3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All over	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EXTENT	N	S	E	W	U	N	S	E	W	U	N	S	E	W	U	N	S	E	W	U	N	S	E	W	U
Minor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moderate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Major	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please describe any damage caused to the memorial by the vegetation

Are any trees or shrubs causing damage to the memorial? No Yes *please describe*

21. GRASS CUTTING:

- Has grass killer been used around the base of the stone? No Yes
 Has turf been removed from around the base of the stone? No Yes
 Has grass cuttings been left on the surface of the stone? No Yes
 Is there any evidence of damage to the memorial from grass cutting? No Yes *state below* See 18

22. ANIMALS: Is there any evidence of damage by animals, for example through burrowing, heavy bird droppings, damage from hooves or use of the memorial as a rubbing stone? No Yes *please describe*

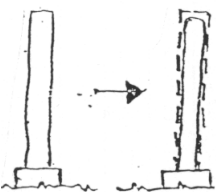
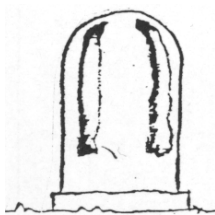
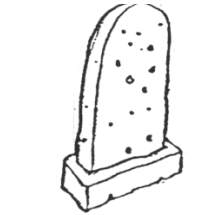
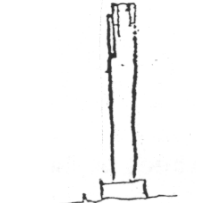
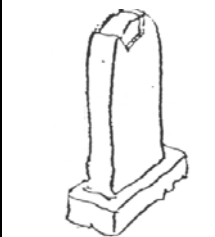
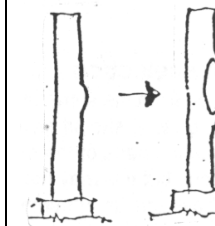
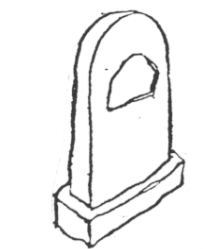

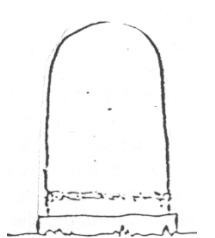


23. PEOPLE:

- Is the grave visited and tended? No Yes
 Is there any graffiti on the memorial? No Yes
 Is there any crayon / rubbing marks on the memorial? No Yes

24. IS THERE ANY OTHER DAMAGE OR OTHER FACTORS CAUSING PROBLEMS TO THE MEMORIAL?
 No Yes *please describe*

PART 5: Stone Decay

25. STONE DECAY Tick any forms of decay visible on the memorial. Complete, where necessary, for each separate stone type showing signs of decay. Tick the relevant box to show which area of the memorial is affected and to show the extent of decay. Fill in question 26 each decay type present.

<input type="checkbox"/> NOT VISIBLE <input type="checkbox"/> VISIBLE – go to Question 26  <p>Surface loss Granular erosion</p>	<input type="checkbox"/> NOT VISIBLE <input type="checkbox"/> VISIBLE – go to Question 26  <p>Differential weathering Granular erosion</p>	<input type="checkbox"/> NOT VISIBLE <input type="checkbox"/> VISIBLE – go to Question 26  <p>Cratering and pitting Granular erosion</p>	<input type="checkbox"/> NOT VISIBLE <input type="checkbox"/> VISIBLE – go to Question 26  <p>Delamination Planar erosion</p>	<input type="checkbox"/> NOT VISIBLE <input type="checkbox"/> VISIBLE – go to Question 26  <p>Contour scaling Planar erosion</p>	<input type="checkbox"/> NOT VISIBLE <input type="checkbox"/> VISIBLE – go to Question 26  <p>Surface blistering Planar erosion</p>
<input type="checkbox"/> NOT VISIBLE <input type="checkbox"/> VISIBLE – go to Question 26  <p>Scaling and flaking Planar erosion</p>	<input type="checkbox"/> NOT VISIBLE <input type="checkbox"/> VISIBLE – go to Question 26  <p>Pollution deposit Surface deposit</p>	<input type="checkbox"/> NOT VISIBLE <input type="checkbox"/> VISIBLE – go to Question 26  <p>Salts deposit Surface deposit</p>	<input type="checkbox"/> NOT VISIBLE <input type="checkbox"/> VISIBLE – go to Question 26  <p>Misc. staining Surface deposit</p>	<input type="checkbox"/> NOT VISIBLE <input type="checkbox"/> VISIBLE – go to Question 26  <p>Cracking and crazing Misc. decay</p>	<input type="checkbox"/> NOT VISIBLE <input type="checkbox"/> VISIBLE – go to Question 26 <p>Any "other" decay - please describe</p> <p>Misc. decay</p>

GRAVESTONE RECORDING FORM: INCLUDING CONDITION SURVEY

Graveyard Ref:

Memorial Ref:

26. DETAILS OF STONE DECAY PRESENT: Complete a separate box for each example of stone decay found on a specific stone type (e.g. if one decay type is present on two stone types fill out two boxes). Tick the relevant box to show which memorial face(s) are affected, which part of the memorial face is damaged (top / middle / bottom / all) and the extent of decay.

Decay Type:						Decay Type:						Decay Type:					
On Stone Type:						On Stone Type:						On Stone Type:					
EXTENT	N	S	E	W	U		N	S	E	W	U		N	S	E	W	U
Major	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moderate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Minor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LOCATION	N	S	E	W	U		N	S	E	W	U		N	S	E	W	U
Top 1/3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Middle 1/3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bottom 1/3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All over	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Decay Type:						Decay Type:						Decay Type:					
On Stone Type:						On Stone Type:						On Stone Type:					
Extent	N	S	E	W	U		N	S	E	W	U		N	S	E	W	U
Major	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moderate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Minor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Location	N	S	E	W	U		N	S	E	W	U		N	S	E	W	U
Top 1/3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Middle 1/3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bottom 1/3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All over	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Decay Type:						Decay Type:						Decay Type:					
On Stone Type:						On Stone Type:						On Stone Type:					
Extent	N	S	E	W	U		N	S	E	W	U		N	S	E	W	U
Major	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moderate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Minor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Location	N	S	E	W	U		N	S	E	W	U		N	S	E	W	U
Top 1/3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Middle 1/3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bottom 1/3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All over	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COMMENTS: where relevant describe decay patterns in more detail

PART 6: Factors Affecting Decay

29. DATE OF MEMORIAL: No date available Date of memorial (year) Is this year:
 the date stone was erected year of death of the first person mentioned on the stone
 first legible date of death other - *state*

30. FACTORS AFFECTING DECAY: The following factors may trigger stone decay, offer protection to the memorial or have no effect at all depending on individual circumstances. Consider how, or indeed if, they have influenced the condition of the memorial you have looked at. Please tell us about any evidence which influenced your judgment.

Factor	Relevance and Comments
<p>Stone selection can influence the rate of decay. Even when sourced from the same quarry, stone durability varies. Harder wearing stone should have been selected for key structural or ornamental parts of the memorial or for gravestones in exposed locations but this may not always be the case. Less durable stone may have cracks or numerous inclusions. Compare the memorial you are recording to other gravestones nearby which are of a similar shape and made from the same type of stone. If your memorial is in a better condition, then stone selection has possibly offered some protection against decay. If your stone is worse off, then it is likely that stone selection has contributed to its decay. If there is no major difference between your memorial and similar gravestones close by, then stone selection is not a relevant factor affecting decay.</p>	<p>Has no effect <input type="checkbox"/> <i>go to next section.</i> Acts as a trigger for decay <input type="checkbox"/> Protects the stone <input type="checkbox"/> <i>Please give details...</i></p>
<p>Stone working, the design of a memorial and carving. The way the stone has been prepared by the mason can affect how a memorial decays. For example, a stone erected with its bedding planes running vertically is more vulnerable to decay. Some memorial designs can cause water to pool on the surface or run down the face of the stone. In other circumstances projecting stonework can protect underlying areas of a memorial. Carving (which increases the surface to volume ratio of the stone) can also make a memorial more vulnerable to decay - so stonework with high relief forms or intricate ornamentation could experience greater erosion than flat plain faces.</p>	<p>Has no effect <input type="checkbox"/> <i>go to next section.</i> Acts as a trigger for decay <input type="checkbox"/> Protects the stone <input type="checkbox"/> <i>Please give details...</i></p>
<p>The juxtaposition of different stone types and materials may act as a trigger for decay. Some stones are more robust than others. A stronger stone will increase the stress placed on the weaker or more porous material it's placed next to, making the latter decay more quickly. The method of joining different stone types together can also cause problems if iron dowels and clamps are used. This is because metals have different properties to stone. As temperatures change iron fittings will expand and contract, which may force the surrounding stone to crack.</p>	<p>Absent <input type="checkbox"/> or has no effect <input type="checkbox"/> <i>go to next section</i> Acts as a trigger for decay <input type="checkbox"/> Protects the stone <input type="checkbox"/> <i>Please give details...</i></p>
<p>Cement and concrete Cement may be used as a mortar between stone blocks or for repairs; stones may also have been reset in concrete. Lime mortar is more porous than stone – hence any water in the stone moves to the joints and evaporates from here. In contrast cement and concrete are far less permeable and can cause water to accumulate above joints, which may increase decay in the adjacent stonework. If local sand is used for mortar, it may be sea sand and therefore a rich source of salts. Salts are particularly damaging to stonework.</p>	<p>Absent <input type="checkbox"/> or has no effect <input type="checkbox"/> <i>go to next section</i> Acts as a trigger for decay <input type="checkbox"/> Protects the stone <input type="checkbox"/> <i>Please give details...</i></p>
<p>Other Factor(s), please describe For example, in the graveyard neighbouring structures or trees may shelter a memorial from the weather - but in other situations these factors could also cause problems by directing rain or wind onto the gravestone.</p>	<p>Absent <input type="checkbox"/> or has no effect <input type="checkbox"/> Acts as a trigger for decay <input type="checkbox"/> Protects the stone <input type="checkbox"/> <i>Please give details...</i></p>

Continuation Sheet

Ruled writing area with horizontal dashed lines for text entry.