State Site Number: 31 Revisit? 🗆

NORTH CAROLINA ARCHAEOLOGICAL SITE FORM Citizen Cemetery Site Form

Office of State Archaeology/Division of Archives & History

Please fill out as much of the information as possible and attach a map showing the location of the site. A North Carolina state site number will be assigned to your site and the location added to our records based on the information you provide. 1. STATE SITE NUMBER [FOR OFFICE USE]:

2. OTHER CEMETERY NUMBER(S):

3. IS THIS A REVISIT SUBMISSION?

GENERAL IDENTITY, LOCATION, AND OWNERSHIP INFORMATION

4. CEMETERY NAME(S):

5. COUNTY:

6. CEMETERY ADDRESS OR LOCATION DESCRIPTION:

7. CEMETERY OWNER AND ADDRESS (if different than above):

8. NAME AND CONTACT INFO OF INDIVIDUAL(S) OR INSTITUTION(S) WHO HOLD MORE INFORMATION ABOUT THIS CEMETERY:

8A. WHAT INFO DO THEY HAVE?

9. ACCESS TO THIS CEMETERY IS:

□RESTRICTED

□YES □NO

□UNRESTRICTED

9A. EXPLAIN:

PRIMARY RECORDER INFORMATION

10. FIRST AND LAST NAME:

11. ORGANIZATION:

12. ADDRESS:

13. PHONE NUMBER:

14. RECORDERS RELATIONSHIP TO CEMETERY: □PROPERTY OWNER □DESCENDANT □RESEARCHER □GENERAL INTEREST

MAP DATA

Please attach a map showing location of cemetery. Contact NC OSA staff for help. Please provide coordinates (like Latitude and Longitude) so the site is recorded accurately on the landscape. A plan view sketch of cemetery is encouraged.

15. LATITUDE: LONGITUDE: OTHER COORDINATES:

15A. SOURCE (GOOGLE MAPS, GPS, ETC.):

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CEMETERY DESCRIPTION

16. CEMETERY TYPE:

DPUBLIC

DMUNICIPAL DSTATE DFEDERAL DMILITARY DTRIBAL

PRIVATE

□FAMILY □CHURCH (REPORT NAME/DENOMINATION) □FRATERNAL/ORGANIZATION (REPORT NAME) □OTHER

UNKNOWN/ABANDONED

16A. DETAILS OR EXPLANATIONS:

17. CURRENT STATUS:

UWELL MAINTAINED AND PRESERVED

□NOT MAINTAINED

□MARGINALLY MAINTAINED

□OVERGROWN, BUT EASILY IDENTIFIABLE

DOVERGROWN, NOT EASILY IDENTIFIABLE

INOT IDENTIFIABLE AS A BURIAL SITE (OR KNOWN TO EXIST BY ORAL TRADITION)

CEMETERY FEATURES INFORMATION

Please complete the attached Marker Description Form and submit with application.

18. NUMBER OF MARKED GRAVES: 19. POSSIBLE NUMBER OF UNMARKED GRAVES:

20. KNOWN YEARS OR PERIOD OF USE:

21. DATE OF EARLIEST MARKER: 22. DATE OF MOST RECENT MARKER:

23. BURIALS IN THIS CEMETERY ARE:

□<u>MARKED</u> WITH GRAVESTONES, MONUMENTS, WALLS, FENCES, CRYPTS, MAUSOLEUMS, OR OTHER VISIBLE FUNERARY ARCHITECTURE

□<u>UNMARKED ONLY</u>, DEPRESSIONS PRESENT OR POSSIBLY MARKED BY UNINSCRIBED FIELD STONES, PLANTS, SHELLS, OR ARTIFACTS

□ <u>BOTH</u> MARKED AND UNMARKED

24. ARE THERE UNUSUAL OR SIGNIFICANT MARKERS PRESENT?

24A. IF YES, PLEASE DESCRIBE:

25. TO WHICH CULTURE WERE PEOPLE BURIED IN THIS CEMETERY MOST OFTEN AFFILIATED? (CHECK ALL THAT APPLY):

□AFRICAN AMERICAN □EURO AMERICAN □NATIVE AMERICAN □UNKNOWN □OTHER (DESCRIBE):

25A. HOW HAS THE ABOVE BEEN DETERMINED (EX. DOCUMENTS, ARTIFACTS, ORAL TRADITION)?

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26. ARE ARTIFACT PRESENT ON OR NEAR BURIALS OR WITHIN THE CEMETERY'S GROUNDS?

 \Box YES \Box NO \Box UNKNOWN

26A. DESCRIBE, INCLUDING LOCATION OR PROXIMITY TO OTHER CEMETERY ELEMENTS:

27. IS THE CEMETERY ENCLOSED?

 \Box YES \Box NO

27A. TYPE AND MATERIAL OF ENCLOSURE:

□FENCE (MATERIAL TYPE):

□HEDGE (WHICH SPECIES):

□OTHER (EXPLAIN):

28. ARE THERE ANY OTHER NOTABLE FEATURES OR STRUCTURES WITHIN THIS CEMETERY? \Box YES \Box NO

28A. DESCRIBE:

THREATS

29. ARE THERE ACTIVITIES OR NATURAL FORCES THAT THREATEN THE STABILITY OF THE SITE OR MIGHT IMPACT THE BURIALS? (CHECK ALL THAT APPLY.)

DEVELOPMENT OR CONSTRUCTION ACTIVITIES DVANDALISM DANIMALS/GRAZING FARMING OPERATIONS DINDUSTRIAL OPERATIONS DEROSION DEGLECT NONE KNOWN OTHER (DESCRIBE):

29A. EXPLAIN:

HISTORICAL SIGNIFICANCE OF THE CEMETERY OR PERTINENT INFORMATION

EXPLAIN HERE:

Please email or mail completed form, map and any photographic attachments to:

Melissa Timo Historic Cemetery Specialist Office of State Archaeology 4619 Mail Service Center Raleigh, NC 27699-4619 <u>melissa.timo@ncdcr.gov</u> (919-814-6562)

Other Cemetery Number				110 0	ISA STAFF USE: State Site Number:31	
Name(s) on marker	Birth date	Death Date	Marker Type	Marker Material	Condition of marker	Inscription



Cemetery Site File Form Submission Checklist

Required

 \Box Completed form

 \Box Site location coordinates

□Мар

Strongly encouraged

□Planview map of cemetery layout

□ Marker description form

□Photographs

Warmly welcomed

 \Box Site histories

Genealogical narratives

Need help?

Refer to the North Carolina Citizen Site Form Instructions for instructions and tips.

Still can't find your answer?

Contact OSA! Melissa.timo@ncdcr.gov or 919-814-6562

