

Marshall Main Street Program

BUILDING SURVEY

Telephone (217) 826-9023

Structure Address: 606 Archer

Date: 12/11/2011

Reference No.: 08081318304035

Prepared By: Kim Smith

E 1/3 Lot S Block 22



Name of Present Business: vacant (was Diamond Tavern)

Type of Business: _____

Present Building Owner: Lori Martin

Estimated Construction Date: c. 1870

Original Business or Use: _____

Historic Name: _____

Any drawings or pictures of early building available: _____

Marshall Main Street Program

BUILDING SURVEY

Telephone (217) 826-9023

Structure Address: 600 Archer

Date: 12/11/11

Reference No.: _____

Prepared By: K. Smith

Location: No Side of Archer - 3rd bldg. E of corner; South facing

Dimensions: Width _____ Length _____

Corner Building:

Structure Height: 1-Story 2-Story 3-Story

Foundation: Concrete Stone Block/Brick Other Type _____

Exterior Walls: Brick Stone Vertical Wood Siding
 (Above 1st Floor) Horizontal Wood Wood Shingle Stucco
 Asphalt Siding Asbestos Siding Artificial Stone
 Concrete Block Aluminum Siding Other

(First Floor) Brick Stone Vertical Wood Siding
 Horizontal Wood Wood Shingle Stucco
 Asphalt Siding Asbestos Siding Artificial Stone
 Concrete Block Aluminum Siding Other 2nd

Windows Wood Metal Double Hung
 (Above 1st Floor) Casement Sliding Stained, leaded or beveled
 (Side Hinge)
 Boarded Replaced with brick & filled Other type _____

(First Floor) Wood Metal Double Hung
 Casement Sliding Stained, leaded or beveled
 (Side Hinge)
 Boarded Replaced with brick & filled Other type _____

Store Front Display Area Rippled or Colored above display Clear above display

Marshall Main Street Program

BUILDING SURVEY

Telephone (217) 826-9023

Structure Address: 606 Archer

Date: 12/11/11

Reference No.: _____

Prepared By: K. Smith

Awnings	<input checked="" type="checkbox"/> First Floor	<input type="checkbox"/> Second Floor
Material	<input type="checkbox"/> Canvas	<input type="checkbox"/> Aluminum
	<input type="checkbox"/> Constructed	<input type="checkbox"/> Wood Shingle
		<input checked="" type="checkbox"/> Roofing Material
Doors	<input checked="" type="checkbox"/> Wood	<input type="checkbox"/> Metal
	<input checked="" type="checkbox"/> Clear glass in door 30%	<input type="checkbox"/> Glass
	<input type="checkbox"/> Sidelite	<input type="checkbox"/> Mostly solid wood
	<input type="checkbox"/> Transom	<input type="checkbox"/> Stained, leaded, or beveled
		<input type="checkbox"/> Stained, leaded, or beveled
Cornice	<input type="checkbox"/> None	<input checked="" type="checkbox"/> Decorative
	<input type="checkbox"/> Brackets	<input type="checkbox"/> Panels, Windows
		<input type="checkbox"/> Style <u>Hulinite</u>
		<input type="checkbox"/> Other
Main Entrance	<input checked="" type="checkbox"/> Centered	<input type="checkbox"/> Off center to right
	<input type="checkbox"/> Entrance to upper floors	<input type="checkbox"/> Off center to left
		<input type="checkbox"/> Side entrance (Corner Building)
Unique Ornamental Trim	<input type="checkbox"/> Bay	<input type="checkbox"/> Tower or Turret
	<input type="checkbox"/> Arches	<input checked="" type="checkbox"/> Ornamental Column or Parts
	<input type="checkbox"/> Decorative Metal Works	<input type="checkbox"/> Decorative Stone Work
	<input type="checkbox"/> Outside Stairs	<input type="checkbox"/> Simple
	<input type="checkbox"/> Decorative Cross Beam	<input type="checkbox"/> Decorative Metal
	<input type="checkbox"/> Decorative Rosettes	<input type="checkbox"/> Wood
		* <u>Decorative window mounds - (cannot discern material)</u>

Present Colors: Walls: White / maroon lower half of 1st fl. Sidewall _____
white (If corner)

Windowtrim: White

Doors: maroon

Awning: brown

Stairs: _____

2nd Floor Use: Unused Storage Apt. Office

3rd Floor Use: N/A Unused Storage Apt. Office

Marshall Main Street Program

BUILDING SURVEY

Telephone (217) 826-9023

Structure Address: 606 Archer

Date: 12/11/11

Reference No.: _____

Prepared By: K. Smith

Any original or early interior features still in tact (lights, tin ceiling, etc.)

Integrity of original structure:

- Unaltered
- Slight modification on the building
- Slight modification 1st floor only
- Major modification entire building
- Major modification 1st floor only

Ease to restore original appearance:

Very easy Restore windows, take down awnings, etc.

Moderate
(exterior) Remove awning, repair 2nd story windows by utilizing entire window opening, uncover 1st story transom

Difficult
(interior) Floor completely warped/will need replaced
looks to have much damage (moisture?)

Very Difficult

Marshall Main Street Program

BUILDING SURVEY

Telephone (217) 826-9023

Structure Address: ⁶604 Archer

Date: 3-3-01

Reference No.: _____

Prepared By: Gretchen Claypool



Name of Present Business: The Diamond Tavern

Type of Business: Tavern

Present Building Owner: _____

Estimated Construction Date: _____

Original Business or Use: _____

Historic Name: _____

Any drawings or pictures of early building available: NO

Marshall Main Street Program

BUILDING SURVEY

Telephone (217) 826-9023

Structure Address: _____

Date: _____

Reference No.: _____

Prepared By: _____

Location: North Side of Archer Avenue

Dimensions: Width _____ Length _____

Corner Building:

Structure Height: 1-Story 2-Story 3-Story

Foundation: Concrete Stone Block/Brick Other Type _____

Exterior Walls:	<input checked="" type="checkbox"/>	Brick	<input type="checkbox"/>	Stone	<input type="checkbox"/>	Vertical Wood Siding
(Above 1st Floor)	<input type="checkbox"/>	Horizontal Wood	<input type="checkbox"/>	Wood Shingle	<input type="checkbox"/>	Stucco
	<input type="checkbox"/>	Asphalt Siding	<input type="checkbox"/>	Asbestos Siding	<input type="checkbox"/>	Artificial Stone
	<input type="checkbox"/>	Concrete Block	<input type="checkbox"/>	Aluminum Siding	<input type="checkbox"/>	Other

(First Floor)	<input checked="" type="checkbox"/>	Brick	<input checked="" type="checkbox"/>	Stone	<input type="checkbox"/>	Vertical Wood Siding
	<input type="checkbox"/>	Horizontal Wood	<input type="checkbox"/>	Wood Shingle	<input type="checkbox"/>	Stucco
	<input type="checkbox"/>	Asphalt Siding	<input type="checkbox"/>	Asbestos Siding	<input type="checkbox"/>	Artificial Stone
	<input type="checkbox"/>	Concrete Block	<input type="checkbox"/>	Aluminum Siding	<input type="checkbox"/>	Other

Windows	<input checked="" type="checkbox"/>	Wood	<input type="checkbox"/>	Metal	<input type="checkbox"/>	Double Hung
(Above 1st Floor)	<input type="checkbox"/>	Casement (Side Hinge)	<input type="checkbox"/>	Sliding	<input type="checkbox"/>	Stained, leaded or beveled
	<input type="checkbox"/>	Boarded	<input type="checkbox"/>	Replaced with brick & filled	<input type="checkbox"/>	Other type <i>original H's Display space</i>

(First Floor)	<input checked="" type="checkbox"/>	Wood	<input type="checkbox"/>	Metal	<input type="checkbox"/>	Double Hung
	<input type="checkbox"/>	Casement (Side Hinge)	<input type="checkbox"/>	Sliding	<input type="checkbox"/>	Stained, leaded or beveled
	<input type="checkbox"/>	Boarded	<input type="checkbox"/>	Replaced with brick & filled	<input type="checkbox"/>	Other type _____

Store Front Display Area Rippled or Colored above display Clear above display

Marshall Main Street Program

BUILDING SURVEY

Telephone (217) 826-9023

Structure Address: _____

Date: _____

Reference No.: _____

Prepared By: _____

Awnings	<input checked="" type="checkbox"/>	First Floor	<input type="checkbox"/>	Second Floor
Material	<input type="checkbox"/>	Canvas	<input type="checkbox"/>	Aluminum
	<input type="checkbox"/>	Constructed	<input checked="" type="checkbox"/>	Wood Shingle
	<input type="checkbox"/>		<input type="checkbox"/>	Roofing Material
Doors	<input checked="" type="checkbox"/>	Wood	<input type="checkbox"/>	Metal
	<input type="checkbox"/>	Clear glass in door 30%	<input type="checkbox"/>	Glass
	<input type="checkbox"/>	Sidelite	<input type="checkbox"/>	Mostly solid wood
	<input type="checkbox"/>	Transom	<input type="checkbox"/>	Clear
	<input type="checkbox"/>		<input type="checkbox"/>	Stained, leaded, or beveled
	<input type="checkbox"/>		<input type="checkbox"/>	Stained, leaded, or beveled
Cornice	<input type="checkbox"/>	None	<input checked="" type="checkbox"/>	Decorative
	<input checked="" type="checkbox"/>	Brackets	<input checked="" type="checkbox"/>	Style _____
	<input type="checkbox"/>		<input type="checkbox"/>	Other _____
Main Entrance	<input checked="" type="checkbox"/>	Centered	<input type="checkbox"/>	Off center to right
	<input type="checkbox"/>	Entrance to upper floors	<input type="checkbox"/>	Off center to left
	<input type="checkbox"/>		<input type="checkbox"/>	Side entrance (Corner Building)
Unique Ornamental	<input type="checkbox"/>	Bay	<input type="checkbox"/>	Tower or Turret
Trim	<input checked="" type="checkbox"/>	Arches	<input checked="" type="checkbox"/>	Balcony
	<input type="checkbox"/>	Decorative Metal Works	<input type="checkbox"/>	Ornamental Column or Parts
	<input type="checkbox"/>	Outside Stairs	<input type="checkbox"/>	Decorative Stone Work
	<input type="checkbox"/>	Decorative Cross Beam	<input type="checkbox"/>	Decorative Brick
	<input type="checkbox"/>	Decorative Rosettes	<input checked="" type="checkbox"/>	Decorative Metal
			<input checked="" type="checkbox"/>	Wood
			<input checked="" type="checkbox"/>	Window Hoods

Present Colors: Walls: white + yellow Sidewall _____
 Windowtrim: brown (If corner)
 Doors: white
 Awning: brown
 Stairs: N/A

2nd Floor Use: Unused Storage Apt. Office

3rd Floor Use: N/A Unused Storage Apt. Office

Marshall Main Street Program

BUILDING SURVEY

Telephone (217) 826-9023

Structure Address: _____

Date: _____

Reference No.: _____

Prepared By: _____

Exterior Renovations: _____

Description:

Estimated Date: _____ Architect or Builder _____

Original Owner: _____

Other Owners:	Dates		1st Floor Use
	From	To	
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2nd & 3rd Floor

Offices or
Residences

Marshall Main Street Program

BUILDING SURVEY

Telephone (217) 826-9023

Structure Address: _____

Date: _____

Reference No.: _____

Prepared By: _____

Any original or early interior features still in tact (lights, tin ceiling, etc.)

Integrity of original structure:

- Unaltered
- Slight modification on the building
- Slight modification 1st floor only
- Major modification entire building
- Major modification 1st floor only

Ease to restore original appearance:

- Very easy Restore windows, take down awnings, etc.

- Moderate *remove awning, repaint,*

- Difficult

- Very Difficult

Marshall Main Street Program

BUILDING SURVEY

Telephone (217) 826-9023

Structure Address: _____

Date: _____

Reference No.: _____

Prepared By: _____

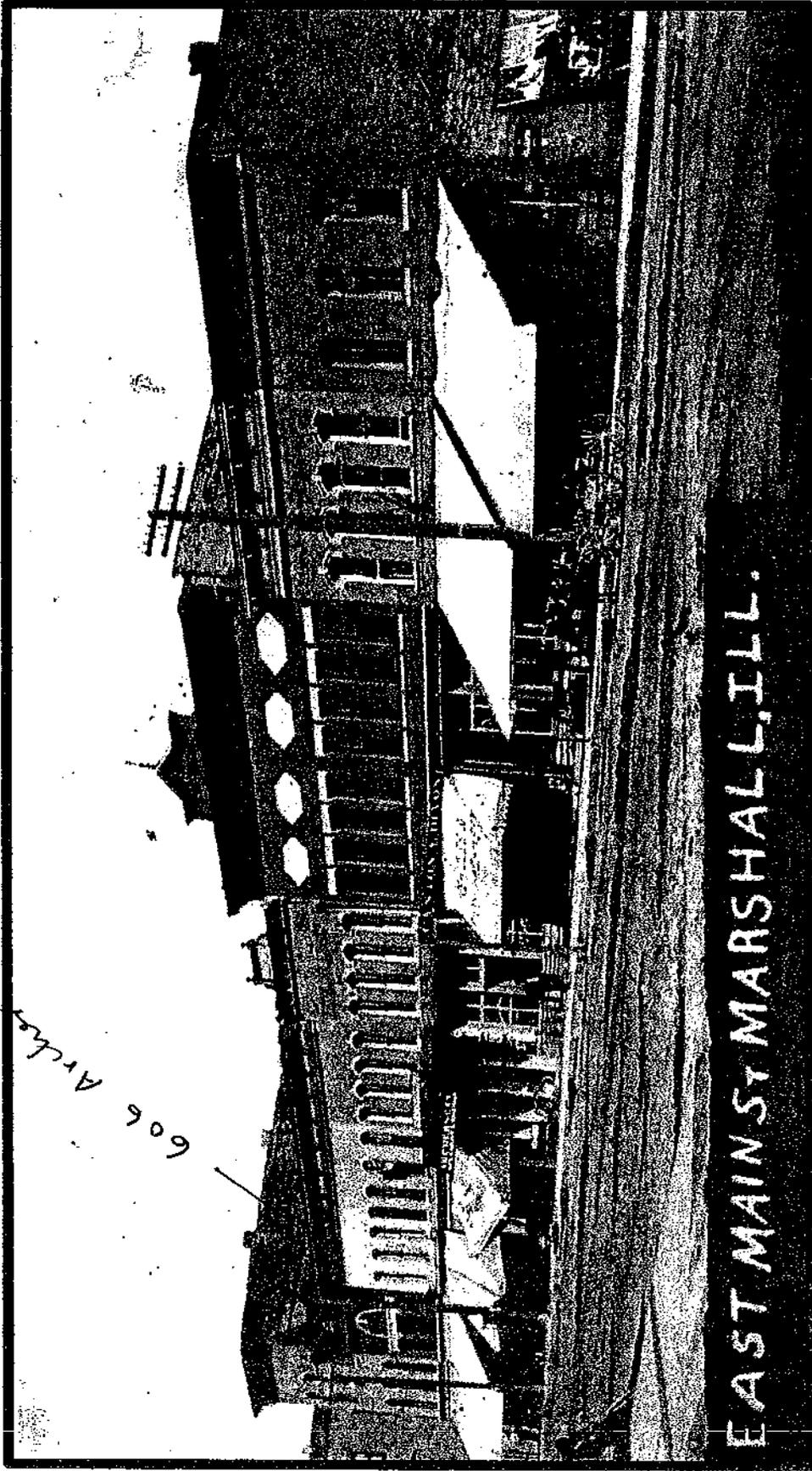
Condition of structure:

- Excellent
 - Good (No structure problems; needs maintenance)
 - Fair (Needs major maintenance & minor structure)
 - Poor (Deteriorated & structure problems)
-

Historical significance

- | | |
|--|--|
| <input type="checkbox"/> Date of origin | <input type="checkbox"/> Occupant |
| <input type="checkbox"/> Architectural style | <input type="checkbox"/> Importance to community |
| <input type="checkbox"/> Architect | <input type="checkbox"/> Importance to streetscape |
-

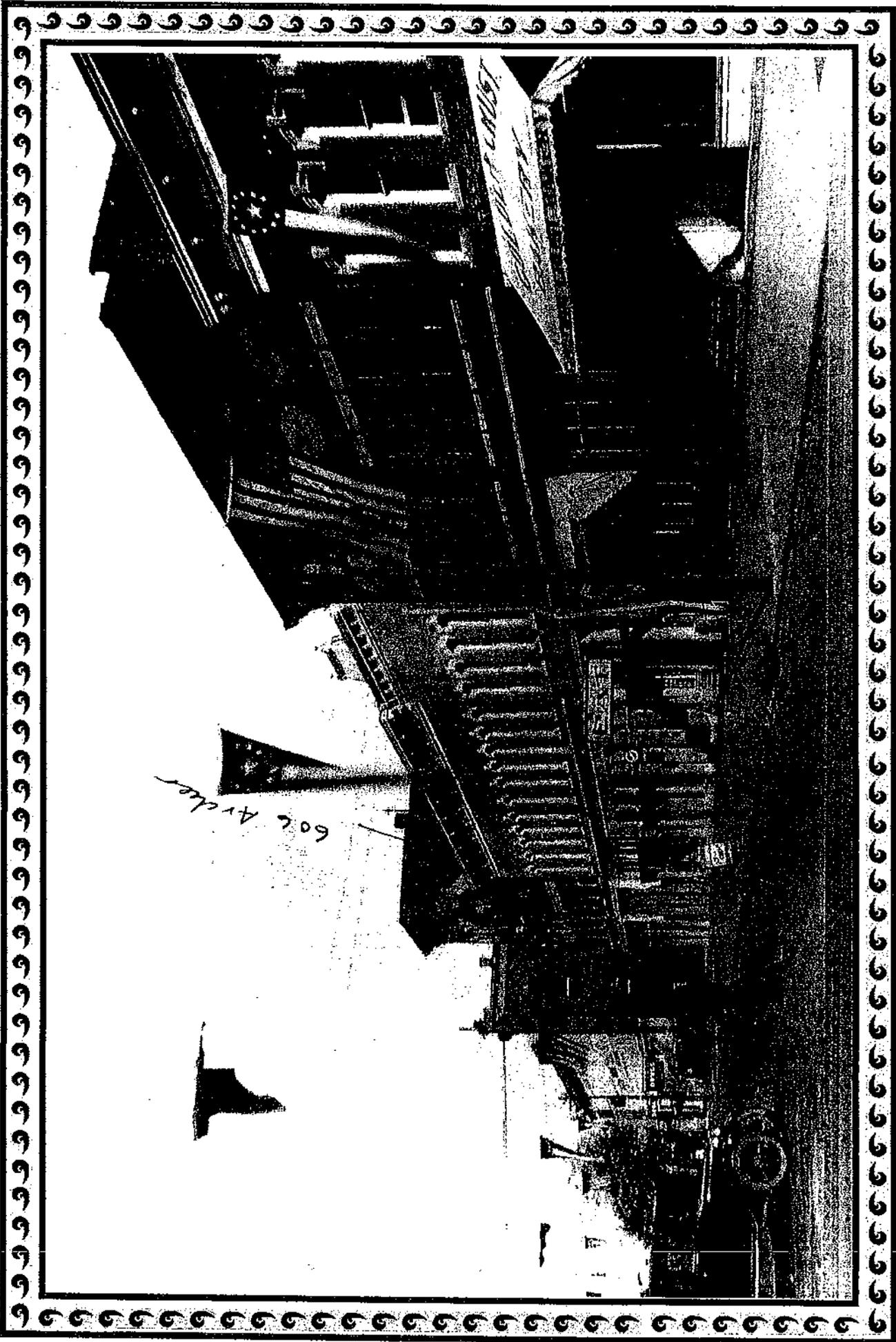
Legal Description:



600 Block of Archer Avenue - North side of the street

Photo from 1880's

Note the dirt street and the horse & wagon tied up
at the hitching post.



Archer Avenue
Marshall, Illinois

Diamond Tavern

606 Archer

Tavern

2 story

Empty

18'

no corner lot

1

Entablatures

Oakley's supermarket and the Dulaney Bank are shown on the northeast corner of Sixth and Main Streets in Marshall. (Submitted by Beatrice Hornbrook)

