

# Marshall Main Street Program

## BUILDING SURVEY

Telephone (217) 826-9023

Structure Address: 609 ARLETER

Date: 3/8/99

Reference No.: \_\_\_\_\_

Prepared By: Harley Bennett

Location: 4th Bldg East of 6th St. on the South Side of ARLETER

Dimensions: Width 18' Length 40'

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 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 _____

(First Floor)	<input checked="" type="checkbox"/>	Wood	<input type="checkbox"/>	Metal	<input checked="" 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

- -

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

**Present Colors:** Walls: \_\_\_\_\_ Sidewall \_\_\_\_\_  
 (If corner)

Windowtrim: \_\_\_\_\_

Doors: \_\_\_\_\_

Awning: \_\_\_\_\_

Stairs: \_\_\_\_\_

**2nd Floor Use:**  Unused  Storage  Apt.  Office

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

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Date: \_\_\_\_\_

Reference No.: \_\_\_\_\_

Prepared By: \_\_\_\_\_

Exterior Renovations: added aluminum awning, repainted  
Description: \_\_\_\_\_

Estimated Date: \_\_\_\_\_ Architect or Builder \_\_\_\_\_

Original Owner: \_\_\_\_\_

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

2nd & 3rd Floor  
Offices or  
Residences \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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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.  
*remove awning, restore lower & upper windows*

Moderate

Difficult

Very Difficult

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Prepared By: \_\_\_\_\_

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## 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:

# Marshall Main Street Program

708 Archer Avenue

Telephone (217-826-9023)

## BUILDING SURVEY

Structure Address: 609 Archer

Date: 3-9-12

Reference No.: 08081318303005  
W13 Lot 3, Block 27 609

Prepared by: C. Lyman



Name of Present Business: UCS

Type of Business: Telecommunication

Present Business Owner: Ted Srednik

Estimated Construction Date: 1868 new brick front - part of Strewer's Row.  
1972 Barney Wellhouse remodeled the front

Original Business Use: Charles Strewer's: Bakery

Historic Name: Strewer's Building

Any drawings or pictures of early building available: yes

ADDRESS 609 Archer

NAME OF BUSINESS DCS

TYPE OF BUSINESS \_\_\_\_\_

NUMBER OF STORIES 2

TYPE OF USE IF ANY 2ND FLOOR Storage

3RD FLOOR \_\_\_\_\_

APPROXIMATE WIDTH OF BUILDING 18 FT.

ON CORNER LOT ? \_\_\_\_\_ YES  NO

NUMBER OF PARKING PLACES IN FRONT 1

NUMBER OF PARKING PLACES ON SIDE 0

UNIQUE FEATURES OF BUILDING:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMPLETED BY : Morcroft

Tringley  
Breneman

4/97

Downtown Business Inventory

Who is doing business downtown now? The ER Committee needs an inventory of all businesses in the downtown district. This information will be used to update the market analysis for downtown Marshall. The Analysis will be used to better understand the current economic conditions and identify opportunities for growth. Please fill out the information and return it to the Main Street Office or call and we can pick it back up. Thank you.

Date: \_\_\_\_\_

Business: \_\_\_\_\_

Year business started: \_\_\_\_\_ # of employees: Full time \_\_\_\_\_ Part time \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ email: \_\_\_\_\_

Website: \_\_\_\_\_

Owner: \_\_\_\_\_

Local contact if not owner: \_\_\_\_\_

Title: \_\_\_\_\_

Business Type: \_\_\_\_\_

Size of space in square feet: \_\_\_\_\_

Marshall Downtown Property Inventory

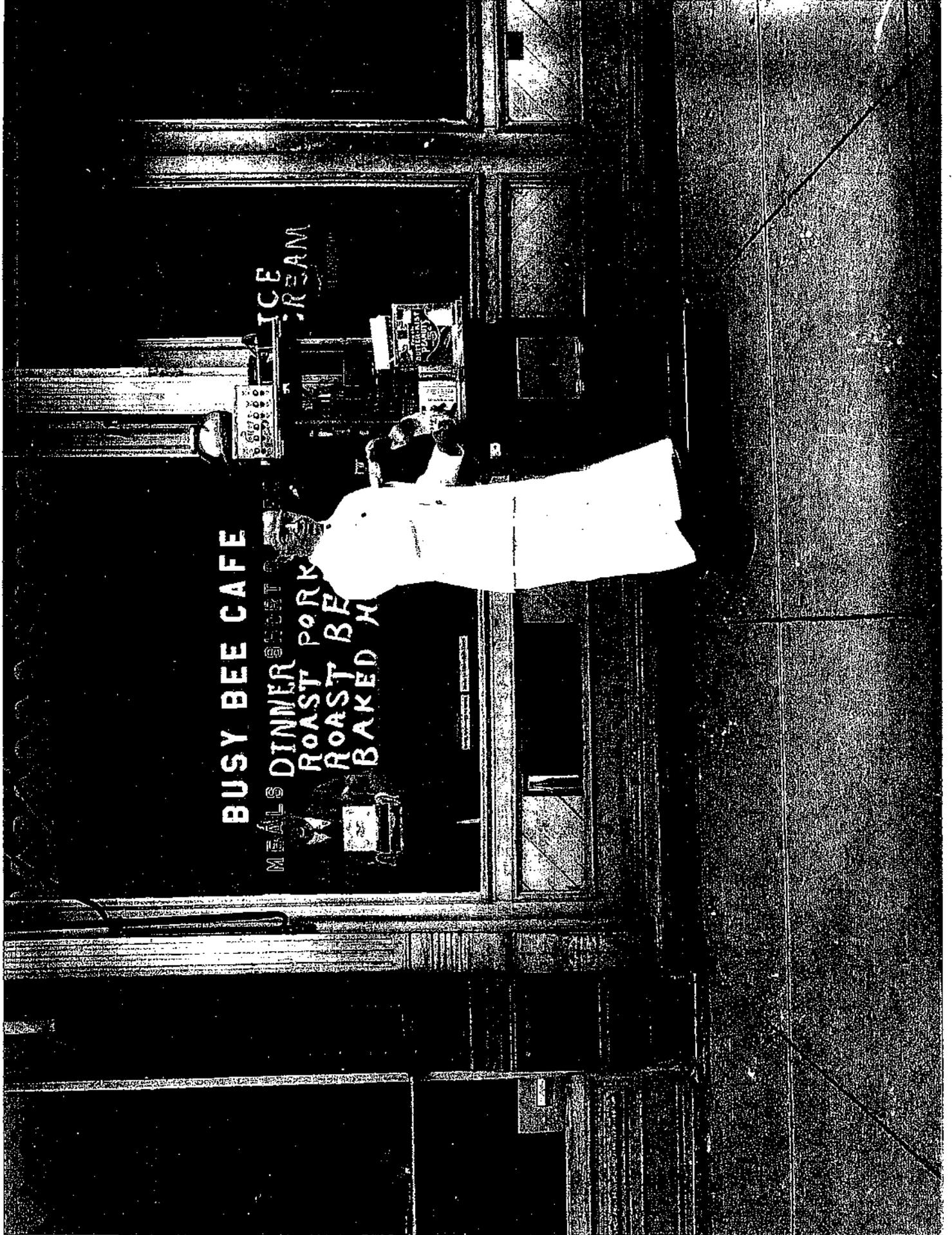
Lot size, tax lot number, legal description:  
\_\_\_\_\_

Building size, # of stories, square feet of each floor:  
\_\_\_\_\_

Current tenants:  
\_\_\_\_\_

Rents:  
\_\_\_\_\_

*Shelley*



Busy Bee Café – Hornbrook – 609 Archer – also at 611 Archer according to Dr. Mitchell

2011 Evan Lyca

609 Archer



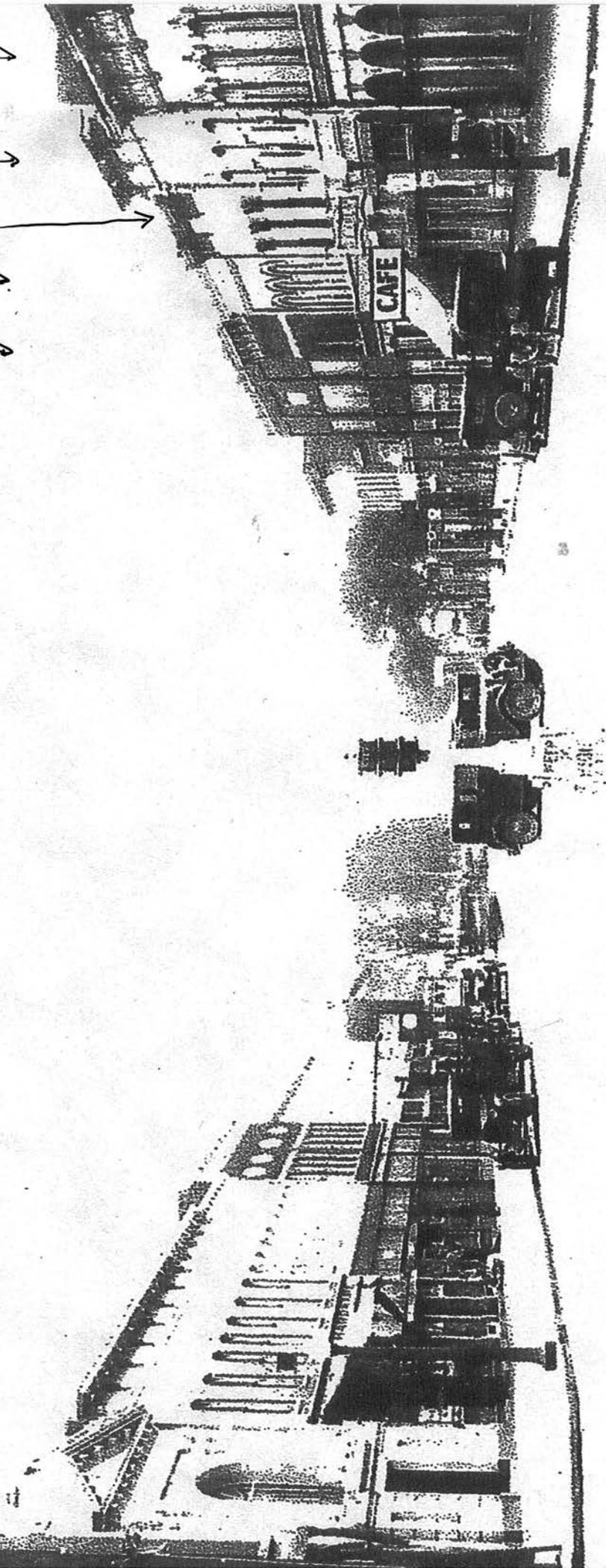
909 ↖

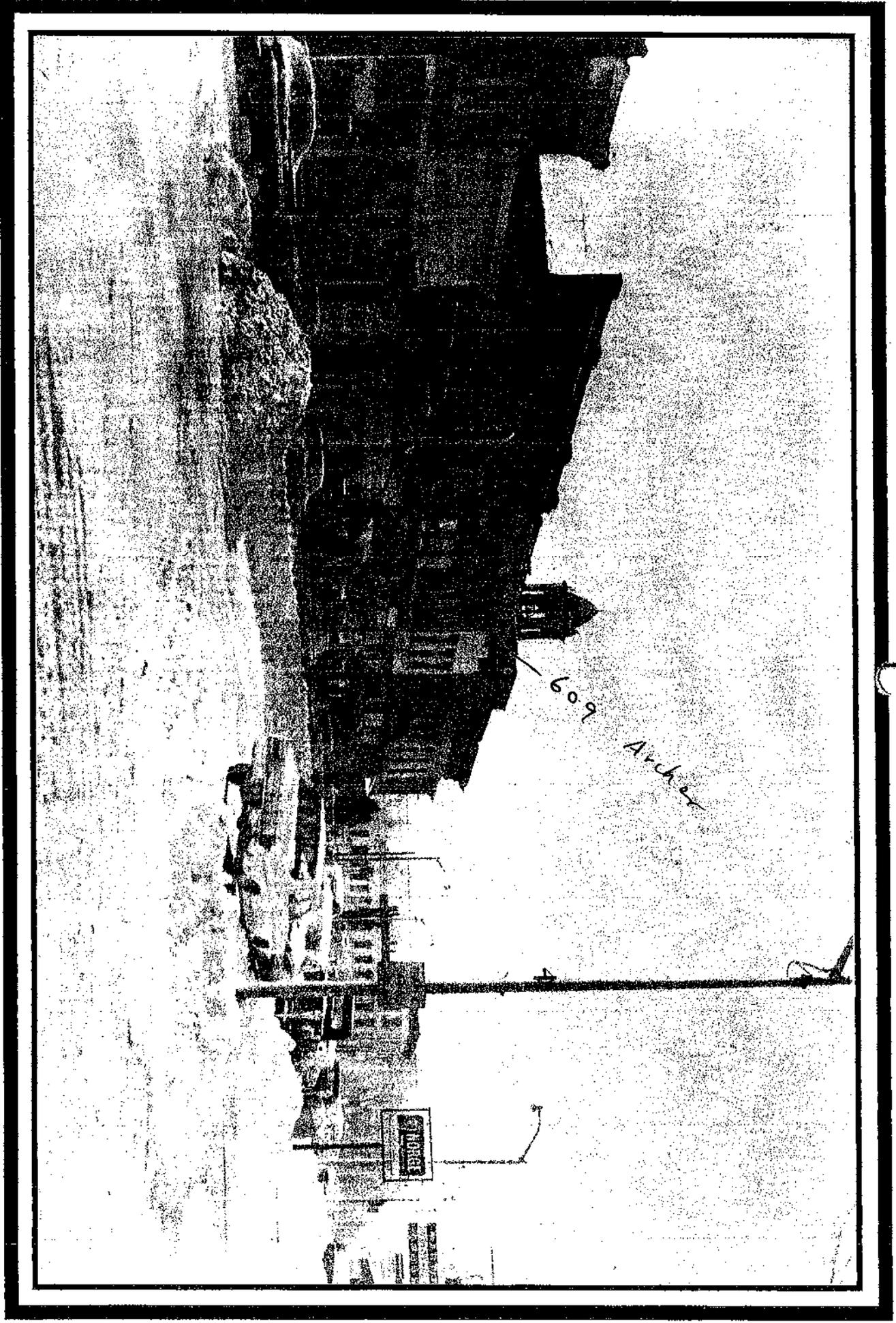
208 ↖

604 ↖

419 ↖

619 ↖





Downtown Marshall 1965  
Seventh Street and Archer Avenue