

Pacific Coast Conservation

Art Collections Care & Conservation

SCULPTURE CONDITION ASSESSMENT FORM														
CLIENT:														
ARTIST:														
TITLE:														
YEAR:														
DIMENSIONS:														
LOCATION:														
MEDIA:	<input type="checkbox"/>	Copper Alloy	<input type="checkbox"/>	Cast Stone	<input type="checkbox"/>	Steel	<input type="checkbox"/>	Ceramic	<input type="checkbox"/>	Stone	<input type="checkbox"/>	Wood	<input type="checkbox"/>	Glass
		Other:												

STRUCTURAL ISSUES				SURFACE ISSUES			
<input type="checkbox"/>	Leaning	<input type="checkbox"/>	Unbalanced	<input type="checkbox"/>	Scratches	<input type="checkbox"/>	Abrasions
<input type="checkbox"/>	Broken	<input type="checkbox"/>	Cracks	<input type="checkbox"/>	Pitting	<input type="checkbox"/>	Etching
<input type="checkbox"/>	Splits	<input type="checkbox"/>	Holes	<input type="checkbox"/>	Staining	<input type="checkbox"/>	Salts/Efflorescence
<input type="checkbox"/>	Missing parts	<input type="checkbox"/>	Dent/Deformation	<input type="checkbox"/>	Mineral Deposits	<input type="checkbox"/>	Pooling Water
<input type="checkbox"/>	Chips/ Losses	<input type="checkbox"/>	Disjointed	<input type="checkbox"/>	Discoloration	<input type="checkbox"/>	Surface Corrosion
<input type="checkbox"/>	Previous Repairs	<input type="checkbox"/>	Erosion	<input type="checkbox"/>	Soil/ Grime	<input type="checkbox"/>	Flaking/Cleaving
<input type="checkbox"/>	Insect Damage	<input type="checkbox"/>	Loss of function	<input type="checkbox"/>	Spalling	<input type="checkbox"/>	Accretions
<input type="checkbox"/>	Vandalism	<input type="checkbox"/>	Structural Corrosion	<input type="checkbox"/>	Smudges	<input type="checkbox"/>	Failed Coating
<input type="checkbox"/>	Failed Connection	<input type="checkbox"/>	Other:	<input type="checkbox"/>	Droppings/Insects	<input type="checkbox"/>	Biological Growth
<input type="checkbox"/>	Other:			<input type="checkbox"/>	Worn Patina	<input type="checkbox"/>	Graffiti
<input type="checkbox"/>	Other:			<input type="checkbox"/>	Other:		

Condition Summary:

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Maintenance Proposal:

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Maintenance Cost Estimate:							
Frequency:	<input type="checkbox"/>	Once Yearly	<input type="checkbox"/>	Twice Yearly	<input type="checkbox"/>	Other:	<input type="checkbox"/>

Treatment Proposal:

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Treatment Cost Estimate:						
Treatment Priority:	<input type="checkbox"/>	1: High	<input type="checkbox"/>	2: Medium	<input type="checkbox"/>	3: Low

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