

**STATE OF MISSISSIPPI DEMOLITION/RENOVATION NOTIFICATION FORM**

*Please type or print legibly.*

**Incomplete notices will not meet notification requirements.**

**I. TYPE OF NOTICE:**       Original       Revision       Canceled  
     Annual       Info. Only

\* Address correction from 1100 Chapman St to 1110 Chapman St.

**II. TYPE OF PROJECT:**       Renovation       Demolition  
     Ordered Demolition       Emergency Renovation

**III. SITE INFORMATION:** Name: Neighborhood Development Corporation  
 Description: single family dwelling  
 Address: 1110 Chapman Street  
 City: Tupelo County: Lee State: MS ZIP: 38802  
 Contact Person: Lynda Ford Telephone: 662-841-6520

**IV. OWNER INFORMATION:** Name: Neighborhood Development Corporation  
 Full Mailing Address: 1110 Chapman Street Tupelo MS 38802  
 Contact Person: Lynda Ford Telephone: 662-841-6520

**V. ASBESTOS REMOVAL CONTRACTOR:** Name: EFC Environmental + Selective Demolition  
 Certification No.: ABC-00005192 Expiration Date: 5-9-16  
 Full Mailing Address: 4546 Cal Steens Rd Caledonia MS 39740  
 Contact Person: Edward A Clay Telephone: 662-386-6386

**VI. CONTRACTOR (Other):** Name: James A Hodges Construction  
 Full Mailing Address: 1281 CR 811 Sattillo MS 38806  
 Contact Person: Andy Hodges Telephone: 662-842-8538

**VII. ASBESTOS REMOVAL PROJECT DATES (MM/DD/YY):**  
 Removal Project Start: 01/19/17 Removal Project Stop: 01/21/17

**VIII. DEMOLITION/RENOVATION PROJECT DATES (MM/DD/YY):**  
 Project Start: 01/23/17 Project Stop: 01/27/17 Prep. Date: 01/23/17

**IX. BUILDING INFORMATION:** Bldg. Size (SQ FT): 1200 Bidg. Size (LNFT): \_\_\_\_\_  
 No. of Floors: 1 Age in Years: 50+  
 Present Use: vacant Prior Use: single family dwelling

**X. ASBESTOS INSPECTION:**  
 Was site inspected to determine presence of asbestos:  Yes  No  
 Inspection Date: 12/02/15 Asbestos Present?  Yes  No  
 Inspector: Edward A Clay Cert. No.: ABI 00006706 Expiration Date: 8-7-17  
 Identify suspect materials sampled: asphalt shingles, black tar flashing, transite siding, drywall + surfacing  
 Laboratory Analysis: TEM \_\_\_\_\_ PLM X Other \_\_\_\_\_ joint compound, window sealant, vinyl flooring  
 Name of Laboratory: Crisp Analytical, LLC

**XI. QUANTITY OF RACM TO BE REMOVED:**  
 Pipes (LN FT) \_\_\_\_\_ Surface Area (SQ FT) \_\_\_\_\_  
 Volume of Facility Components(CU FT) \_\_\_\_\_

**XII. QUANTITY OF NONFRIABLE ASBESTOS**       NOT REMOVED       TO BE REMOVED:  
 Category I: \_\_\_\_\_ Category II: Approx 1200 sq ft

**XIII. WASTE TRANSPORTER:** Name: GoBox  
 Full Mailing Address: 100 Rosecrest Drive, Columbus MS 39701  
 Contact Person: \_\_\_\_\_ Telephone: 662-328-5642

RECEIVED  
 JAN - 6 2017  
 Dept. of Environmental Quality

STATE OF MISSISSIPPI DEMOLITION/RENOVATION FORM - CONTINUED

XIV. WASTE ASBESTOS DISPOSAL SITE: Name: Three Rivers Landfill  
Physical Location: 1904 Highway 76W Pontotoc MS 38863  
Full Mailing Address: same as above  
Contact Person: \_\_\_\_\_ Telephone: 662-488-0444  
\*All asbestos waste should go to a permitted sanitary landfill.

XV. DISPOSAL SITE FOR DEMOLITION DEBRIS (Other than asbestos):  
Name: Trnco  
Physical Location: 544 Birmingham Ridge Rd Sattillo Ms 38866  
Full Mailing Address: same as above  
Contact Person: Tim May Telephone: 662-869-2151  
\*All demolition debris (other than asbestos) should go to an authorized Rubbish Site, or to a permitted sanitary landfill.

XVI. REMOVAL/RENOVATION PROCEDURES TO BE USED (Check all that apply):  
 Strip & Removal     Double Bagging     Mechanical Chipping     Component Removal  
 Wrecking Ball     Gross Demolition     Remove Intact     Bulldozer  
 Containment     Glove Bag     Explode     Negative Air  
 Wet Method     Roofing Saw     Other - Explain Below:

XVII. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK:  
Asbestos containing materials will be kept wet during removal, securely double bagged in 6mil poly and labeled  
excavator + bulldozer - knock down, load + haul

XVIII. PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO A POWDER OR SMALL PIECES:  
work will cease + MDEQ contacted  
\*Will MDEQ be notified of any significant changes?  Yes ( ) No

XIX. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, IDENTIFY THE AGENCY BELOW:  
Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Authority: N/A  
Date of Order: \_\_\_\_\_ Date Demolition to Begin: \_\_\_\_/\_\_\_\_/\_\_\_\_

XX. EMERGENCY DEMOLITION/RENOVATIONS: Date of Emergency: \_\_\_\_/\_\_\_\_/\_\_\_\_, Time: \_\_\_\_\_  
Description of the sudden, unexpected event:  
N/A  
Explanation of how the event caused unsafe conditions or would cause equipment damage or unreasonable financial burden:

XXI. When asbestos-containing material is present, an individual trained in the provisions of the regulation (40 CFR 61 Subpart M) will be on site during the demolition or renovation and evidence that the required training has been accomplished by this person will be available for inspection during normal business hours.

I certify that all of the above information is correct.  
ANDY HODGES, PRESIDENT    Andy Hng    1/3/17  
Type or Print Name & Title    Signature    Date

MAIL TO: Office of Pollution Control    Physical Address 515 Amite Street  
P.O. Box 2261    Jackson, MS 39201  
Jackson, MS 39225  
(601) 961-5171