

STATE OF MISSISSIPPI DEMOLITION/RENOVATION NOTIFICATION FORM

Please type or print legibly.

Incomplete notices will not meet notification requirements.

RECEIVED

JAN - 9 2017

Dept. of Environmental Quality

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

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

III. SITE INFORMATION: Name Kentucky Fried Chicken  
Description: ONE STORY BRICK, WOOD, METAL AND CONCRETE  
Address: 527 N. Memphis Street  
City: Holly Springs County: MARSHALL State: MS ZIP: 38635  
Contact Person: PAT PATTON Telephone: 662 789-5360

IV. OWNER INFORMATION: Name: RJ ALLEN + ASSOCIATES  
Full Mailing Address: 527 N. Memphis St. Holly Springs, MS 38635  
Contact Person: R.J. ALLEN Telephone: 901 872-0145

V. ASBESTOS REMOVAL CONTRACTOR: Name: Jimmy Bell  
Certification No.: ABC-0001281 Expiration Date: 1/30/17  
Full Mailing Address: P.O. BOX 133, DELTA CITY, MS 39061  
Contact Person: JIMMY BELL Telephone: 662 873-4551

VI. CONTRACTOR (Other): Name: TOTAL LAWN CARE OF PONTOTOC, LLC  
Full Mailing Address: P.O. BOX 1074 PONTOTOC, MS 38863  
Contact Person: PAT PATTON Telephone: 662 489-5360

VII. ASBESTOS REMOVAL PROJECT DATES (MM/DD/YY):  
Removal Project Start: 1/14/17 Removal Project Stop: 1/15/17

VIII. DEMOLITION/RENOVATION PROJECT DATES (MM/DD/YY):  
Project Start: 1/17/17 Project Stop: 1/19/17 Prep. Date: 1/16/17

IX. BUILDING INFORMATION: Bldg. Size (SQ FT): 4000 Bldg. Size (LNFT): 0  
No. of Floors: 1 Age in Years: 30+  
Present Use: VACANT Prior Use: FAST FOOD CHAIN RESTAURANT (KFC)

X. ASBESTOS INSPECTION:  
Was site inspected to determine presence of asbestos:  Yes  No  
Inspection Date: 11/3/16 Asbestos Present?  Yes  No  
Inspector: RAYMOND A. TOYGERSEN Cert. No.: ABI-00006858 Expiration Date: 7/6/2017  
Identify suspect materials sampled: ROOT FLASHING / WINDOW CAULKING  
Laboratory Analysis: TEM  PLM  Other   
Name of Laboratory: B.H. & M. ENVIRONMENTAL (AKA - MILLINGTON) TN. 38053

XI. QUANTITY OF RACM TO BE REMOVED:  
Pipes (LN FT) 0 Surface Area (SQ FT) 0  
Volume of Facility Components (CU FT) 0

XII. QUANTITY OF NONFRIABLE ASBESTOS NOT REMOVED 110 LNFT ROOT FLASHING 6" WIDE TO BE REMOVED:  
Category I: 0 Category II: ROOT FLASHING / 6 COMPLETE WINDOWS (4'x5')

XIII. WASTE TRANSPORTER: Name: Jimmy Bell  
Full Mailing Address: P.O. BOX 133, DELTA CITY, MS 39061  
Contact Person: JIMMY BELL Telephone: 662 873-4551

STATE OF MISSISSIPPI DEMOLITION/RENOVATION FORM - CONTINUED

**XIV. WASTE ASBESTOS DISPOSAL SITE:** Name: LeFlore County Landfill  
 Physical Location: 15200 Hwy 49E South, Sidon, ms 38954  
 Full Mailing Address: P.O. Box 1698 Greenwood, ms 38935  
 Contact Person: Mabel Brown Telephone: 662 455-7760  
 \*All asbestos waste should go to a permitted sanitary landfill.

**XV. DISPOSAL SITE FOR DEMOLITION DEBRIS** (Other than asbestos):  
 Name: Marshall County Rubbish Landfill  
 Physical Location: Hwy 4 West Holly Springs, ms 38635  
 Full Mailing Address: P.O. Box 219 Holly Springs, ms 38635  
 Contact Person: Marshall County Board of Supervisors Telephone: 662 252-7903  
 \*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):**

<input type="checkbox"/> Strip & Removal	<input checked="" type="checkbox"/> Double Bagging	<input type="checkbox"/> Mechanical Chipping	<input type="checkbox"/> Component Removal
<input type="checkbox"/> Wrecking Ball	<input type="checkbox"/> Gross Demolition	<input checked="" type="checkbox"/> Remove Intact	<input type="checkbox"/> Bulldozer
<input type="checkbox"/> Containment	<input type="checkbox"/> Glove Bag	<input type="checkbox"/> Explode	<input type="checkbox"/> Negative Air
<input checked="" type="checkbox"/> Wet Method	<input type="checkbox"/> Roofing Saw	<input type="checkbox"/> Other - Explain Below:	

**XVII. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK:**  
PREP WORK AREA, SPRAY TAC 6 MIL POLY INSIDE AND OUTSIDE BUILDING, REMOVE WINDOWS INTACT FROM THE OUTSIDE. WRAP AND TAPE WINDOWS USING 6 MIL POLY. USE AXE AND ROOTING SHOVEL TO REMOVE ROOF FLASHING, PLACE INTO BAGS.

**XVIII. PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLER, PULVERIZED, OR REDUCED TO A POWDER OR SMALL PIECES:**  
STOP WORK, CONTACT OWNER. MAKE NECESSARY CHANGES

\*Will MDEQ be notified of any significant changes? (  ) Yes (  ) No

**XIX. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, IDENTIFY THE AGENCY BELOW:**  
 Name: N/A Title: \_\_\_\_\_  
 Authority: \_\_\_\_\_  
 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.

Jimmy Bell / Contractor \_\_\_\_\_ Jimmy Bell \_\_\_\_\_ 11/4/17  
 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