

STATE OF MISSISSIPPI
DEMOLITION/RENOVATION NOTIFICATION FORM

Revised: 2/00

I. TYPE OF NOTICE: (x) Original () Revision () Canceled () Annual () Information Only

II. TYPE OF PROJECT: (x) Renovation (x) Demolition (x) Ordered Demolition (x) Emergency Renovation

III. SITE INFORMATION

Name: 1214 Vernon, 1301 Penton, Fairchild Hall, Library, Johnson Hall, Tatum Hall, William Carey University

Description: Apartments, housing, and offices

Address: 1214 Vernon St, 1301 Penton St, Fairchild Hall, Library, Johnson Hall

City: Hattiesburg County: Forrest State: MS Zip: 39401

Contact Person: Bob Blevins Telephone: 601-318-6155

RECEIVED
FEB - 6 2017
Dept. of Environmental Quality

IV. OWNER INFORMATION

Name: William Carey University

Full Mailing Address: 498 Tuscan Avenue, Hattiesburg, MS 39401

Contact Person: Bob Blevins Telephone: 601-318-6155

V. ASBESTOS REMOVAL CONTRACTOR

Name: Environmental Services, LLC

Certification No. C-00001330

Exp. Date: 4-17

Full Mailing Address: 253 Delk Road Hattiesburg, MS 39401

Contact Person: Joe Venus Jr. Telephone: 601 582-2277

VI. CONTRACTOR (Other)

Name: N/A

Full Mailing Address: _____

Contact Person: _____ Telephone: _____

VII. ASBESTOS REMOVAL PROJECT DATES (MM/DD/YY)

Removal Project Start: 2/3/17 Removal Project Stop: 2/20/17

VIII. DEMOLITION/RENOVATION PROJECT DATES (MM/DD/YY)

Project Start: _____ Project Stop: _____ Prep. Date: / /

IX. BUILDING INFORMATION

Bldg. Size: (SQ FT): @1,200, 1,400, 9,000, 15,000, 22,000 Bldg Size: _____ (LN FT):

No. of Floors 2 Age in Years: over 20

Present Use: none Prior Use: residence, office, library

X. ASBESTOS INSPECTION:

Was site inspected to determine presence of asbestos? (x) Yes () no

Inspection Date: 1/17 Asbestos Present? (x) Yes () no

Inspector Joe Venus Cert. No.: ABI-00001353 Exp. Date: 4/2017

Identify suspect materials sampled: Ceiling, flooring, walls, windows, roofing,

Laboratory Analysis: TEM X PLM Other

Name of Laboratory: Triangle Environmental Services

XI. QUANTITY OF RACM TO BE REMOVED:

Pipes (LN FT): _____ Surface Area 25,000 (SQ FT)

Volume of Facility Components (CU FT)

XII. QUANTITY OF NONFRIABLE ASBESTOS:

NOT REMOVED x TO BE REMOVED

Category I: / SF Category II: / LF

XIII. WASTE TRANSPORTER:

Name: Enviro, Inc.

Full Mailing Address: 101 Broadway drive, Hattiesburg, MS 39401

Contact Person: John Telephone: 601-584-9955

**STATE OF MISSISSIPPI
DEMOLITION/RENOVATION FORM -CONTINUED**

XIV. WASTE ASBESTOS DISPOSAL SITE: Name: Pine Belt Regional Waste Auth.
Physical Location: Highway 26 Runnelstown MS
Full Mailing Address: P.O. Box 389 Petal, MS 39465
Contact Person: _____ Telephone: 601-545-6676

XV. DISPOSAL SITE FOR DEMOLITION DEBRIS (Other than asbestos):

Name: _____
Physical Location: _____
Full Mailing Address: _____
Contact Person: _____ Telephone: _____

* All demolition debris (other than asbestos) should go to an authorized Rubbish Site, or to a permitted sanitary landfill

XVI. REMOVAL/DEMOLITION PROCEDURES TO BE USED (Check all that apply):

- | | | | |
|--------------------|--------------------|-------------------------|----------------------|
| -x-Strip & Removal | -x-Double Bagging | --Mechanical Chipping | -x-Component Removal |
| --Wrecking Ball | --Gross Demolition | - x- Remove Intact | --Bulldozer |
| -x-Containment | --Glove Bag | --Explode | -x-Negative Air |
| -x-Wet Method | --Roofing Saw | --Other- Explain Below: | |

XVII. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK

Remove ACM using wet method

XVIII. PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO A POWDER OR SMALL PIECES:

Stop work call MDEQ

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: 1 1

XX. EMERGENCY DEMOLITION/RENOVATIONS: Date of Emergency: 1/20/17 Time: _____

Description of the sudden, unexpected event:
Tornado ripped through campus causing most all building to be repaired

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

Type or Print Name and Title: John Signature: [Signature] Date 2/1/17

MAIL TO: Office of Pollution Control
101 West Capitol Street, Suite 100
Jackson, MS 39201
(601) 961-5171

OR P.O. Box 10385
Jackson, MS. 39289-0385