

STATE OF MISSISSIPPI DEMOLITION/RENOVATION NOTIFICATION FORM

Please type or print legibly.

Incomplete notices will not meet notification requirements.

I. TYPE OF NOTICE: [] Original [x] Revision [] Canceled [] Annual [] Info. Only
II. TYPE OF PROJECT: [] Renovation [] Demolition [x] Ordered Demolition [] Emergency Renovation
III. SITE INFORMATION: Name MDOT SR 4 - Holly Springs
Description: 3 Residential structures and accessory sheds + Add brick sign, 3 residences, and accessory sheds
Address: (3W) - 525 MS 4, (8X) 580 MS 4, (9X) 590 MS 4 + Add (2W) 496 MS 4, (6X) 565 MS 4, (10X/W) 617 MS 4
City: Holly Springs County: Marshall State: MS ZIP: 38635
Contact Person: Blane Jackson Telephone: PO Box 1850, Jackson, Mississippi 39215
IV. OWNER INFORMATION: Name: MDOT - Right of Way Division
Full Mailing Address: PO Box 1850, Jackson, Mississippi 39215
Contact Person: Blane Jackson Telephone: 601-359-7001
V. ASBESTOS REMOVAL CONTRACTOR: Name: EnviroRem Inc
Certification No.: ABC-4273 Expiration Date: July 14, 2017
Full Mailing Address: 1715 Lochearn Road, Memphis, TN 38116
Contact Person: Will Brown Telephone: 901-345-0000
VI. CONTRACTOR (Other): Name: McFarland Construction
Full Mailing Address: 5899 Palestine Road, Coldwater, MS 38618
Contact Person: Tim McFarland Telephone: 901-335-6077
VII. ASBESTOS REMOVAL PROJECT DATES (MM/DD/YY):
Removal Project Start: 03 / 16 / 17 Removal Project Stop: 3 / 16 / 17
VIII. DEMOLITION/RENOVATION PROJECT DATES (MM/DD/YY):
Project Start: 3 / 7 / 17 Project Stop: 4 / 7 / 17 Prep. Date: 4 / 7 / 17
IX. BUILDING INFORMATION: Bldg. Size (SQ FT): See Attached Bldg. Size (LNFT):
No. of Floors: Age in Years: Varies
Present Use: Vacant Residential Prior Use: Residential
X. ASBESTOS INSPECTION:
Was site inspected to determine presence of asbestos: [x] Yes [] No
Inspection Date: 4 / 12 / 15 Asbestos Present? [x] Yes [] No
Inspector: Willie Nestor Cert. No.: ABI-2244 Expiration Date: 01/21/17
Identify suspect materials sampled: All suspect materials
Laboratory Analysis: TEM PLM X Other
Name of Laboratory: EMSL Baton Rouge
XI. QUANTITY OF RACM TO BE REMOVED:
Pipes (LN FT) N/A Surface Area (SQ FT)
Volume of Facility Components(CU FT)
XII. QUANTITY OF NONFRIABLE ASBESTOS [] NOT REMOVED [x] TO BE REMOVED
Category I: N/A Category II: 1,500 SF Transite Sliding (6X)
XIII. WASTE TRANSPORTER: Name: McFarland Construction
Full Mailing Address: 5899 Palenstine Road, Coldwater, MS 38618
Contact Person: Tim McFarland Telephone: 901-335-6077

RECEIVED
MAR - 8 2017
Dept of Environmental Quality

STATE OF MISSISSIPPI DEMOLITION/RENOVATION FORM - CONTINUED

XIV. WASTE ASBESTOS DISPOSAL SITE: Name: Add Northeast Mississippi Regional Landfill
Physical Location: 2941 CR 302, Walnut, MS 38683
Full Mailing Address: PO Box 311, Walnut, MS 38683
Contact Person: Sylvia Patterson Telephone: 662 223 6800
*All asbestos waste should go to a permitted sanitary landfill.

XV. DISPOSAL SITE FOR DEMOLITION DEBRIS (Other than asbestos):
Name: NEMS Regional
Physical Location: 2941 CR 302, Walnut, MS 38683
Full Mailing Address: PO Box 311, Walnut, MS 38683
Contact Person: Sylvia Patterson Telephone: 662-223-6800
*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 X Component Removal
Wrecking Ball X Gross Demolition Remove Intact X Bulldozer
Containment Glove Bag Explode Negative Air
X Wet Method Roofing Saw Other - Explain Below:

XVII. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK:
Standard NESHAP Demolition with dust suppression and power equipment. Total structural demo

XVIII. PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO A POWDER OR SMALL PIECES:
Not anticipated due to full survey of structures. If suspect materials are located, stop work and cover debris. Notify MDEQ and Pickering for further analysis and proceed accordingly. Add - Remove transite siding while wetted with hand tools for bagged and manifest disposal. Third party visual clearance prior to demolition.
*Will MDEQ be notified of any significant changes? [X] Yes [] No

XIX. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, IDENTIFY THE AGENCY BELOW:
Name: Blane Jackson Title: Property Mgmt Officer
Authority: MDOT - Right of Way Division
Date of Order: Oct. 18, 2016 Date Demolition to Begin: 12 / 28 / 16

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

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.

Will Brown - VP Consulting Services EnviroRem Inc
Type or Print Name & Title

Signature

3/16/17
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