

STATE OF MISSISSIPPI DEMOLITION/RENOVATION NOTIFICATION FORM

Please type or print legibly.

Incomplete notices will not meet notification requirements.

RECEIVED

MAR 10 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: Barton United Methodist
Description: Demolition of a ~4,000 sqft church.
Address: 3229 Hwy 309N
City: Byhalia County: Marshall State: MS ZIP: 38611
Contact Person: Chris Lefler Telephone: 662-844-3331

IV. OWNER INFORMATION:

Name: Barton United Methodist Church
Full Mailing Address: 3229 Hwy 309 N, Byhalia, MS 38611
Contact Person: M.J Pope Telephone: 662-251-7823

V. ASBESTOS REMOVAL CONTRACTOR:

Name: Century Construction and Realty, Inc.
Certification No.: 11403-MC Expiration Date:
Full Mailing Address: PO Box 1366, Tupelo, MS 38802
Contact Person: Chris Lefler Telephone: (662) 844-3331

VI. CONTRACTOR (Other):

Name: Century Construction & Realty, Inc.
Full Mailing Address: 705 Robert E. Lee Dr.
Contact Person: Chris Lefler Telephone: 662-844-3331

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

Removal Project Start: 03 / 20 / 17 Removal Project Stop: 03 / 23 / 17

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

Project Start: 03 / 15 / 17 Project Stop: 04 / 01 / 17 Prep. Date: 03 / 13 / 17

IX. BUILDING INFORMATION:

Bldg. Size (SQ FT): 4,000 Bldg. Size (LNFT):
No. of Floors: 1 Age in Years: ~60 yrs
Present Use: none Prior Use: church

X. ASBESTOS INSPECTION:

Was site inspected to determine presence of asbestos: Yes No
Inspection Date: 03 / 03 / 17 Asbestos Present? Yes No
Inspector: Laura Finley Cert. No.: ABI 00001301 Expiration Date: March 3, 2017
Identify suspect materials sampled: Floor tiles, shingles, caulk
Laboratory Analysis: TEM PLM XXXX Other
Name of Laboratory: National Econ Corporation

XI. QUANTITY OF RACM TO BE REMOVED:

Pipes (LN FT) N/A Surface Area (SQ FT) N/A
Volume of Facility Components(CU FT)

XII. QUANTITY OF NONFRIABLE ASBESTOS

Category I: ~1,000 sqft Category II: N/A
 NOT REMOVED TO BE REMOVED

XIII. WASTE TRANSPORTER:

Name: Century Construction and Realty, Inc.
Full Mailing Address: PO Box 1366 Tupelo, MS 38802
Contact Person: Dalton Lincoln Telephone: 662-844-3331

STATE OF MISSISSIPPI DEMOLITION/RENOVATION FORM - CONTINUED

XIV. WASTE ASBESTOS DISPOSAL SITE: Name: Three Rivers Landfill
 Physical Location: 1904 MS-76, Pontotoc, MS 38863
 Full Mailing Address: 1904 MS-76, Pontotoc, MS 38863
 Contact Person: Amanda Satterfield Telephone: 662-488-0444
 *All asbestos waste should go to a permitted sanitary landfill.

XV. DISPOSAL SITE FOR DEMOLITION DEBRIS (Other than asbestos):
 Name: Waste Connections
 Physical Location: 11200 MS-178, Olive Branch, MS 38654
 Full Mailing Address: 11200 MS-178, Olive Branch, MS 38654
 Contact Person: _____ Telephone: 662-895-7625
 *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 checked="" type="checkbox"/> Gross Demolition	<input 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:
Demolition of 4,000 sq ft wood framed church with brick siding damaged by recent fire. Demolition of asbestos containing floor tiles via wet method bulk demolition.

XVIII. PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLLED, PULVERIZED, OR REDUCED TO A POWDER OR SMALL PIECES:
Stop work immediately and contact the MDEQ for the next action to be taken.

*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: _____
 Date of Order: _____ Date Demolition to Begin: ____/____/____

XX. EMERGENCY DEMOLITION/RENOVATIONS: Date of Emergency: ____/____/____, Time: _____
 Description of the sudden, unexpected event: _____

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.
 Chris Lefler - Project Manager
 Type or Print Name & Title


 Signature

3/9/17
 Date

MAIL TO: Office of Pollution Control
 P.O. Box 2261
 Jackson, MS 39225
 (601) 961-5171

Physical Address: 515 Amite Street
 Jackson, MS 39201