

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 / 22 / 17 Removal Project Stop: 3 / 22 / 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 Nester 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 Siding (6X)
XIII. WASTE TRANSPORTER: Name: McFarland Construction
Full Mailing Address: 5899 Palestine Road, Coldwater, MS 38618
Contact Person: Tim McFarland Telephone: 901-335-6077

RECEIVED
MAR 20 2017
Dept. of Environmental Quality

Date Change

**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):**

<input type="checkbox"/> Strip & Removal	<input type="checkbox"/> Double Bagging	<input type="checkbox"/> Mechanical Chipping	<input checked="" type="checkbox"/> Component Removal
<input type="checkbox"/> Wrecking Ball	<input checked="" type="checkbox"/> Gross Demolition	<input type="checkbox"/> Remove Intact	<input checked="" 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:**  
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?  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**

3/15/17  
**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**