MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

MDEO Asbestos Section, 515 E. Amite Street, Jackson, MS 39201 Mail notification to: Notification # (IVIII) Date Received (MDEQ use only) (MDEQ_use only) Operator Project # Postmark I. Type of Notification (O=Original R=Revised C=Canceled A= Annual) ORIGINAL II. TYPE OF OPERATION (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation) DEMOLITION III. FACILITY DESCRIPTION (Include building name, number and floor or room number) Address 239 N PRENTISS STREET Zip: 39209 City: JACKSON State: MS Tel: 601-960-1054 Site Location: SAME AS ABOVE Age in Years: 78 Building Size 1,386 # of Floors: 1 Prior Use: RESIDENTIAL Present Use: VACANT IV. FACILITY INFORMATION (Identify owner, removal contractor, and other operator) OWNER NAME: STATE OF MISSISSIPPI Address: 239 N PRENTISS STREET Zip: 39209 City: JACKSON State: MS Tel: 601-960-1054 OR 601-960-1056 Contact: CITY OF JACKSON (CORETTA LAIRD) REMOVAL CONTRACTOR Address: City: Contact: OTHER OPERATOR: M 5 Address: City: Contact: V. IS ASBESTOS PRESENT? (Yes/No) YES - EXTERIOR WALL VI. PROCEDURE, INCLUDING ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL (Include inspector name and date of inspection): EPA 600/R-93/116 METHOD USING POLARIZED LIGHT -MICROSCOPY; INSPECTOR: LEWIS YOUNGER; CERTIFICATION# ABI00001761; EXPIRATION DATE: 7/17/2016; DATE OF INSPECTION: 5/4/2016 VII. APPROXIMATE AMOUNT OF ASBESTOS Nonfriable INCLUDING: Ashestos Material Not Indicate Unit of RACM To Be Removed Measurement Below Regulated ACM to be Removed To Be Category | ACM Not Removed Removed UNIT Category II ACM Not Removed Category I Category II Ln M: **Pipes** EXT. WUL Sq M: Surface Area SqFt Cu M: CuFt: Vol RACM Off Facility Component 7-6--9-17 VIII. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: IX. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: Complete: 8-10-17

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JUN 22 2017

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S), TO BE USED: Remaine and Haul debis								
XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION OR RENOVATION SITE: Component - Wet Methow - Plastic - bagging Labeling								
XII. WASTE TRANSPORTER #1	_							
Name: John Selva	ge.							
Address: 23 Mary Lane								
city: Wood Ville	State: M5	Zip: 39669						
Contact Person: John Selv	age	Tel: 601-502-5613						
WASTE TRANSPORTER #2								
Name:								
Address:								
City:	State:	Zip:						
Contact Person:		Tel:						
XIII. WASTE DISPOSAL SITE BFI	LandFi							
Name: 1716 E. County Line Rd.								
Address:								
city: Kidgeland	State: M 5	zip: 39/57						
Tel: 601-982-9488								
XIV. IF DEMOLITION ORDERED BY A GOVERNMENT AGEN								
Name: CITY OF JACKSON (CORETTA LAIRD)	Title: SUI	Title: SUPERVISOR						
Authority: COMMANDER JAYE COLEMAN								
Date of Order (MM/DD/YY):	ered to Begin (MM/DD/YY):							
XV. FOR EMERGENCY RENOVATIONS:								
Date and Hour of Emergency (MM/DD/YY):								
Description of the sudden unexpected event:								
Explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden:								
xvi. description of procedures to be followed in the event that unexpected asbestos is found or previously nonfriable astestos material becomes crumbled, pulverized, or reduced to powder: Stop - Inspect - Contact M.D. E.O.								
XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR PART 61, SUBPART M) WILL BE ONSITE 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. Toy Ce Selvy (Signature of Owner/Operator) (Date)								
XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT:								



EMSL Analytical, Inc.

11931 Industriplex, Suite 100 Baton Rouge, LA 70809

Tel/Fax: (225) 755-1920 / (225) 755-1989 http://www.EMSL.com / batonrougelab@emsl.com Customer ID: COJA62

EMSL Order: 251602860

Customer PO: Project ID:

Attention: Lewis Younger

City of Jackson PO Box 17

Jackson, MS 39205-0017

Phone: (601) 960-1054 Fax: (601) 960-1700

Received Date: 05/11/2016 9:35 AM

Analysis Date: 05/16/2016 **Collected Date:** 05/04/2016

Project: 239 North Prentiss Street/Case # 2011-1114

Test Report: Asbestos Analysis of Bulk Materials via EPA 600/R-93/116 Method using Polarized Light Microscopy

Sample	Description	Non-Asbestos			Asbestos
		Appearance	% Fibrous	% Non-Fibrous	% Type
P-1	Exterior Wall - Siding	Gray Fibrous		75% Non-fibrous (Other)	25% Chrysotile
251602860-0001		Homogeneous			
P-2	Exterior Wall - Felt	Black Fibrous	60% Cellulose	40% Non-fibrous (Other)	None Detected
251602860-0002		Homogeneous			
P-3	Roof - Shingle	Gray/Black Fibrous	10% Glass	90% Non-fibrous (Other)	None Detected
251602860-0003		Heterogeneous			
P-4	Wall Living Room -	White		100% Non-fibrous (Other)	None Detected
	Sheetrock	Non-Fibrous			
251602860-0004		Homogeneous			

Analyst(s)

Leah Delahoussaye (4)

Brett Heitzmann, Laboratory Manager or Other Approved Signatory

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Samples analyzed by EMSL Analytical, Inc. Baton Rouge, LA NVLAP Lab Code 200375-0, LELAP 01950, TX 300238

Initial Report From: 05/16/2016 09:19:26