

## STATE OF MISSISSIPPI DEMOLITION/RENOVATION NOTIFICATION FORM

Please type or print legibly.

Incomplete notices will not meet notification requirements.

RECEIVED  
JUN 29 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 OLD MOUNT BARTON SCHOOL  
Description: VACANT SCHOOL BUILDING  
Address: ST. PAUL STREET  
City: MERIDIAN County: LAUDERDALE State: MS. ZIP: 39301  
Contact Person: JUSTIN KINARD Telephone: 601-479-7723
- IV. OWNER INFORMATION:** Name: LAUDERDALE COUNTY BOARD OF SUPERVISORS  
Full Mailing Address: 410 CONSTITUTION AVE., MERIDIAN, MS. 39301  
Contact Person: JUSTIN KINARD Telephone: 601-479-7723
- V. ASBESTOS REMOVAL CONTRACTOR:** Name: BILLY SHUMATE CONST.  
Certification No.: ABC-00001893 Expiration Date: SEPT. 7th 2017  
Full Mailing Address: P.O. BOX 4279, MERIDIAN, MS. 39304  
Contact Person: BILLY SHUMATE Telephone: 601-693-3207
- VI. CONTRACTOR (Other):** Name: D & H CONSTRUCTION  
Full Mailing Address: 8589 A.C. BROWN ROAD, OBADIAH MS. 39305  
Contact Person: JUSTIN KINARD Telephone: 601-479-7723
- VII. ASBESTOS REMOVAL PROJECT DATES (MM/DD/YY):**  
Removal Project Start: 7 / 12 / 17 Removal Project Stop: 7 / 17 / 17
- VIII. DEMOLITION/RENOVATION PROJECT DATES (MM/DD/YY):**  
Project Start: 7 / 18 / 17 Project Stop: 9 / 21 / 17 Prep. Date:     /    /
- IX. BUILDING INFORMATION:** Bldg. Size (SQ FT): 15,000 Bldg. Size (LNFT):           
No. of Floors: 1 Age in Years: 65  
Present Use: VACANT Prior Use: SCHOOL BLD.
- X. ASBESTOS INSPECTION:**  
Was site inspected to determine presence of asbestos: ☒ Yes ☐ No  
Inspection Date: 11 / 8 / 12 Asbestos Present? ☒ Yes ☐ No  
Inspector: EDWARD LESNIAK Cert. No.: ABI-00001230 Expiration Date: March 1, 2013  
Identify suspect materials sampled: ROOF, FLOOR TILE, CEILING TILE, DRY WALL, PLASTER, SINK  
Laboratory Analysis: TEM PLM XX Other           
Name of Laboratory: RSA ENVIRONMENTAL, INC.
- XI. QUANTITY OF RACM TO BE REMOVED:**  
Pipes (LN FT)          Surface Area (SQ FT)           
Volume of Facility Components (CU FT)
- XII. QUANTITY OF NONFRIABLE ASBESTOS**          NOT REMOVED XX TO BE REMOVED:  
Category I: 3500 S.F. FLOOR TILE Category II:
- XIII. WASTE TRANSPORTER:** Name: BILLY SHUMATE CONSTRUCTION  
Full Mailing Address: P.O. BOX 4279, MERIDIAN, MS. 39304  
Contact Person: BILLY SHUMATE Telephone: 601-693-3207

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

**XIV. WASTE ASBESTOS DISPOSAL SITE:** Name: PINERIDGE LANDFILL  
 Physical Location: 520 MURPHY RD. MERIDIAN, MS.  
 Full Mailing Address: 520 MURPHY RD., MERIDIAN, MS. 39301  
 Contact Person: JUSTIN CULLPEPPER Telephone: 601-483-0715  
 \*All asbestos waste should go to a permitted sanitary landfill.

**XV. DISPOSAL SITE FOR DEMOLITION DEBRIS (Other than asbestos):**  
 Name: BOSEMAN HILL LANDFILL  
 Physical Location: BARNHILL RD., PINE SPRINGS MS.  
 Full Mailing Address: 200 BRAXTON AVE., MERIDIAN, MS. 39301  
 Contact Person: Anna Telephone: 601-483-9777  
 \*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 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:**

REMOVAL OF FLOOR TILE AND MASTIC FOR  
RENOVATION OF RESTROOMS AREA..

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

AS PER D.E.Q. REQUIREMENTS  
 \*Will MDEQ be notified of any significant changes? (X)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.

BILLY SHUMATE, CONTRACTOR  
 Type or Print Name & Title

Billy Shumate  
 Signature

6-28-17  
 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