Print Form

STATE OF MISSISSIPPI DEMOLITION/RENOVATION NOTIFICATION FORM

Please type or print legibly.

Incomplete notices will not meet notification requirements.

	STATE OF MISSISSIPPI DEMOLITION/RENOVATION NOTIFICATION FORM
	Please type or print legibly.
	Incomplete notices will not meet notification requirements.
1.	Please type or print legibly. Incomplete notices will not meet notification requirements. TYPE OF NOTICE: (xxXOriginal () Revision () Canceled () Annual () Info. Only TYPE OF PROJECT: (X) Renovation () Demolition
II.	TYPE OF PROJECT: (X) Renovation () Demolition () Emergency Renovation
H.	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
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 No. of Floors: 1 Age in Years: 65
	Present Use: VACANT Prior Use: SCHOOL BLD.
х.	ASBESTOS INSPECTION: Was site inspected to determine presence of asbestos: (X) Yes () No Inspection Date: 11 / 8 / 12 Asbestos Present? (X) 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 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 DEMOLITON/RENOVATION FORM - CONTINUED

Full Mailing Address: \$20 MURPHY RD., MERDIAN, MS. 39301 Contact Person: JUSTIN GULLPEPER Telephone: 601–483–0715 *All asbestos waste should go to a permitted sanitary landfill. DISPOSAL SITE FOR DEMOLITION DEBRIS (Other than asbestos): Name: BOSEMAN HILL LANDFILL Physical Location: BASEMAN HILL LANDFILL Physical Location: BASEMAN HILL LANDFILL Physical Location: BASEMAN HILL LANDFILL 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. REMOVAL/RENOVATION PROCEDURES TO BE USED (Check all that apply): Strip & Removal XX Double Bagging Mechanical Chipping Component Removal Wirecking Ball Gross Demolition Remove Intact Buildozer Wirecking Ball Gross Demolition Removal Explode Negative Air XXX. Wet Method Roofing Saw Other-Explain Below: DESCRIPTION OF PLANNED DEMOLITIONOR RENOVATION WORK: REMOVAL OF FLOOR TILE AND MASTIC FOR RENOVATION OF RESTROOMS AREA. PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO A POWDER OR SIMALL PIECES: AS PER D. E. Q. REQUIREMENTS *Will MDEQ be notified of any significant changes? (X)Yes ()No FOEMOLITION ORDERED BY A GOVERNMENT AGENCY, IDENTIFY THE AGENCY BELOW: Name: Title: Date Demolition to Begin:	WASTE ASB	WASTE ASBESTOS DISPOSAL SITE: Name: PINERIDGE LANDFILL Physical Location: 520 MURPHY RD. MERIDIAN, MS.				
Contact Person:USTIN_CULLPEPPER	Physical Loca	MION: 520 MIDDLY DD MEI	OTDIAN MC 20201			
*All asbestos waste should go to a permitted sanitary landfill. 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., MBRIDIAN, MS. 3930] Contact Person: Anna Telephone: 601–483–9777 *All demolition debris (other than asbestos) should go to an authorized Rubblsh Site, or to a permitted sanitary landfill. REMOVAL/RENOVATION PROCEDURES TO BE USED (Check all that apply): Strip & Removal xxx Double Bagging Mechanical Chipping Component Removal Wrecking Ball Gross Demolition Remove Intact Bulldozer Containment Glove Bag Deplode Negative Air Xxx. Wet Method Roofing Saw Other - Explain Below: DESCRIPTION OF PLANNED DEMOLITIONOR RENOVATION WORK: REMOVAL OF FLOOR TILE AND MASTIC FOR RENOVATION OF RESTROOMS AREA. PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO A POWDER OR SMALL PIECES: *WILL MIDEQ be notified of any significant changes? (x) Yes () No Name: Title: AS. PER. D. E. Q. REQUIREMENTS *WILL DEAD OF THE AGENCY DEMOLITION OR DEAD OR NONFRIABLE ACM BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO A POWDER OR SMALL PIECES: **BARDOLITION ORDERED BY A GOVERNMENT AGENCY, IDENTIFY THE AGENCY BELOW: Name: Title: Authority: Date of Order: Date Demolition to Begin:	Full Mailing I	Address: J20 MUNITHI KD., MER	XIDIAN, M5. 39301	(01 /02 0715		
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., MERTDIAN, MS. 39301 Contact Person: Anna Telephone: 6.01–4.83–9.777 *All demolition debris (other than asbestos) should go to an authorized Rubbish Site, or to a permitted sanitary landfill. **REMOVAL/RENOVATION PROCEDURES TO BE USED (Check all that apply): Strip & Removal xx Double Bagging Mechanical Chipping Component Removal Wirecking Ball Gross Demolition Remove Intact Buildozer Containment Glove Bag Explode Negative Air xx. Wet Method Roofing Saw Other-Explain Below: **DESCRIPTION OF PLANNED DEMOLITIONOR RENOVATION WORK:* REMOVAL OF FLOOR TILE AND MASTIC FOR RENOVATION OF RESTROOMS AREA. **PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO A POWDER OR SMALL PIECES: AS. PER D. E. Q. REQUITEMENTS *WILL MDEQ be notifiled of any significant changes? (X)Yes ()No IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, IDENTIFY THE AGENCY BELOW: Name: Tide: Authority: Date of Order: Date Demolition or Begin:	Contact Pers	on: JUSTIN CULLPEPPER	lelephone:	601-483=0/13		
Name: BOSEMAN HILL LANDFILL Physical Location: BARMILL RD. PINE SPRINGS MS. Full Malling Address: 200 BRAXTON AVE., MERIDIAN, MS. 39301 Cortact Person: Anna Telephone: 6.01–4.83–9.77.7 *All demolition debris (other than asbestos) should go to an authorized Rubbish Site, or to a permitted sanitary landfill. *REMOVAL/RENOVATION PROCEDURES TO BE USED (Check all that apply): Strip & Removal XX Double Bagging Mechanical Chipping Component Removal Wrecking Ball Gross Demolition Remove Intact Buildozer Wrecking Ball Gross Demolition Remove Intact Buildozer Wrecking Ball Gross Demolition Remove Intact Buildozer XX Wet Method Roofing Saw Other - Explain Below: DESCRIPTION OF PLANNED DEMOLITIONOR RENOVATION WORK: REMOVAL OF FLOOR TILE AND MASTIC FOR RENOVATION OF RESTROOMS AREA. PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLED, PULVENIZED, OR REDUCED TO A POWDER OR SMALL PIECES: AS PER D. E. Q. REQUITEMENTS *Will MDEQ be notified of any significant changes? (X)Yes ()No IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, IDENTIFY THE AGENCY BELOW: Name: Title: Authority: Date of Order: Date Demolition to Begin: /// EMERGENCY DEMOLITION/RENOVATIONS: Date of Emergency: // Time: Explanation of how the event caused unsafe conditions or would cause equipment damage or unreasonable financial bu When asbestos-containing material is present, an individual trained in the provisions of the regulation (40 CR 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 Type or Print Name & Title Type or Print Name & Title	*All asbestos	waste should go to a permitted sanita	ary landfill.			
Physical Location: BARNHILL RD., PINE SPRINGS MS. Full Malling 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. *REMOVAL/RENOVATION PROCEDURES TO BE USED (Check all that apply): Strip & Removal xx Double Bagging Mechanical Chipping Component Removal Wrecking Ball Gross Demolition Remove Intact Buildozer Containment Glove Bag Explode Negative Air Xxx Wet Method Roofing Saw Other-Explain Below: **DESCRIPTION OF PLANNED DEMOLITIONOR RENOVATION WORK:** **REMOVAL OF FLOOR TILE AND MASTIC FOR RENOVATION OF RESTROOMS AREA.** **PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO A POWDER OR SMALL PIECES: **AS. PER. D. E. Q. REQUITEMENTS** **WIll MDEQ be notified of any significant changes? (X)Yes ()No IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, IDENTIFY THE AGENCY BELOW: Name: Title: Authority: Date of Order: Date Demolition to Begin: /// **EMERGENCY DEMOLITION/RENOVATIONS: Date of Emergency: ///, Time: Description of the sudden, unexpected event: **EMERGENCY DEMOLITION/RENOVATIONS: Date of Emergency: ///, Time: Description of the sudden, unexpected event: **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. **ILLY SHUMATE , CONTRACTOR Type or Print Name & Title **Title: **Date Of Print Name & Title **Signature** **Date Of Print Name & Title **Signature** **Date Of Print Name & Title **Date Of Print Name &	DISPOSALS	DISPOSAL SITE FOR DEMOLITION DEBRIS (Other than asbestos):				
Full Malling Address: 200 BRAXTON AVE., MERIDIAN, MS. 39301 Contact Person: Ama Telephone: 6.01–483–9777 All demolition debris (other than asbestos) should go to an authorized Rubbish Site, or to a permitted sanitary landfill. REMOVAL/RENOVATION PROCEDURES TO BE USED (Check all that apply): Strip & Removal xx Double Bagging Mechanical Chipping Component Removal Wrecking Ball Gross Demolition Removal Mechanical Chipping Negative Air Glove Bag Explode Negative Air Sulfazore Nega			CDDINGS MS			
Contact Person: Anna Telephone:	Physical Loca	HION: DARNHILL RD., FINE	MEDIDIAN MC 20201			
*All demolition debris (other than asbestos) should go to an authorized Rubbish Site, or to a permitted sanitary landfill. REMOVAL/RENOVATION PROCEDURES TO BE USED (Check all that apply): Strip & Removal xx Double Bagging Mechanical Chipping Component Removal Mechanical Chipping Mech						
REMOVAL/RENOVATION PROCEDURES TO BE USED (Check all that apply): Strip & Removal xx Double Bagging Mechanical Chipping Buildozer Buildozer Strip & Removal Glove Bag Explode Negative Air Strip & Remove Intact Buildozer Negative Air Strip & Remove Method Roofing Saw Other - Explain Below: DESCRIPTION OF PLANNED DEMOLITIONOR RENOVATION WORK: REMOVAL OF FLOOR TILE AND MASTIC FOR RENOVATION OF RESTROOMS AREA. PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO A POWDER OR SMALL PIECES: *Will MDEQ be notified of any significant changes? (x)Yes ()No IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, IDENTIFY THE AGENCY BELOW: Name: Title: Authority: Date Of Order: Date Of Emergency: J. Time: Description of the sudden, unexpected event: EMERGENCY DEMOLITION/RENOVATIONS: Date of Emergency: J. Time: Description of the sudden, unexpected event: Explanation of how the event caused unsafe conditions or would cause equipment damage or unreasonable financial bu 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 Signature Total Strip Str	Contact Pers	on: Anna	releptione:	Site of to a pormitted capitany landfill		
Strip & Removal	"All demoin!	on debns (other than aspestos) should	a go to an authorized Rubbish a	one, or to a permitted sameary landing		
Wrecking Ball Gross Demolition Remove Intact Displace Glove Bag Explode Replace Negative Air Scholar Service Air Servi				Component Pomoval		
Containment Glove Bag Content Saw Other - Explain Below: DESCRIPTION OF PLANNED DEMOLITIONOR RENOVATION WORK: REMOVAL OF FLOOR TILE AND MASTIC FOR RENOVATION OF RESTROOMS AREA PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO A POWDER OR SMALL PIECES: AS PER D. E. Q. REQUITEMENTS. *WILL MDEQ be notified of any significant changes? (\(\chi\))Yes (\(\chi\))No IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, IDENTIFY THE AGENCY BELOW: Name: Title: Authority: Date of Order: Date Demolition to Begin: / EMERGENCY DEMOLITION/RENOVATIONS: Date of Emergency:/, Time: Description of the sudden, unexpected event: 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 Description of PLANNED DEMOLITION RENOVATIONS: Date of Emergency:	Strip & I	Removal <u>xx</u> Double Bagging	Mechanical Chipping	Component Kentovai		
DESCRIPTION OF PLANNED DEMOLITIONOR RENOVATION WORK: REMOVAL OF FLOOR TILE AND MASTIC FOR RENOVATION OF RESTROOMS AREA. PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLED, 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 IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, IDENTIFY THE AGENCY BELOW: Name: Title: Authority: Date of Order: Date Demolition to Begin: EMERGENCY DEMOLITION/RENOVATIONS: Date of Emergency:, Time: Description of the sudden, unexpected event: 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 Signature Date Demolition or Plant Name & Title October 11 PLANT AND AREA OF THE AREA OF THE AREA OF THE ACCUMANCE O						
REMOVAL OF FLOOR TILE AND MASTIC FOR RENOVATION OF RESTROOMS AREA. PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLED, 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 IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, IDENTIFY THE AGENCY BELOW: Name: Title: Authority: Date Of Order: Date Demolition to Begin: EMERGENCY DEMOLITION/RENOVATIONS: Date of Emergency: Description of the sudden, unexpected event: 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 Signature Date DESCRIPTION OF RESTROOMS AREA. REMOVATION OF RESTROOMS AREA. REMOVATION OF RESTROOMS AREA. BILLY SHUMATE, CONTRACTOR Signature Date	Contain	ment Glove Bag	Explode	Negative All		
REMOVATION OF RESTROOMS AREA PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO A POWDER OR SMALL PIECES: AS PER D. E. Q. REQUITEMENTS "Will MDEQ be notified of any significant changes? (x) Yes () No IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, IDENTIFY THE AGENCY BELOW: Name:	_xx_Wet Me	thodRoofing Saw	Other - Explain Below:			
PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO A POWDER OR SMALL PIECES: AS PER D. E. Q. REQUITERMENTS *Will MDEQ be notified of any significant changes? (\chi)Yes ()No IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, IDENTIFY THE AGENCY BELOW: Name:	DESCRIPTIO	N OF PLANNED DEMOLITIONOR RE	NOVATION WORK:			
PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO A POWDER OR SMALL PIECES: AS. PER. D. F. Q. REQUIREMENTS. *Will MDEQ be notified of any significant changes? (\chi)Yes ()No IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, IDENTIFY THE AGENCY BELOW: Name: Authority: Date of Order: Date Demolition to Begin: EMERGENCY DEMOLITION/RENOVATIONS: Date of Emergency: Description of the sudden, unexpected event: Explanation of how the event caused unsafe conditions or would cause equipment damage or unreasonable financial but 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 Signature Date Demolition to Print Name & Title ACM BECOMES CRUMBLED, Date OF RESTROOMS AREA. BY ONE SHOULD BE ACM BECOMES CRUMBLED, Date OF RESTROOMS AREA. BY ONE SHOULD BECOMES CRUMBLED, Date OF RESTROOMS AREA. BY ONE SHOULD BECOMES CRUMBLED, Date OF RESTROOMS AREA. BY ONE SHOULD BECOMES CRUMBLED, Date OF RESTROOMS AREA. BY ONE SHOULD BECOMES CRUMBLED, Date OF RESTROOMS AREA. BY ONE SHOULD BECOMES CRUMBLED, Date OF RESTROOMS AREA. BY ONE SHOULD BECOMES CRUMBLED, Date OF RESTROOMS AREA. BY ONE SHOULD BECOMES CRUMBLED, DATE OF SHOULD BECOMES CRUMB		REMOVAL OF FLO	OOR TILE AND MASTIC H	FOR		
PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO A POWDER OR SMALL PIECES: AS PER D. E. Q. REQUITREMENTS *WIII MDEQ be notified of any significant changes? (X)Yes ()No IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, IDENTIFY THE AGENCY BELOW: Name: Title: Authority: Date of Order: Date Demolition to Begin: EMERGENCY DEMOLITION/RENOVATIONS: Date of Emergency: Description of the sudden, unexpected event: Explanation of how the event caused unsafe conditions or would cause equipment damage or unreasonable financial bu 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 Signature Date						
Authority: Date of Order: Date of Order: Date of Order: Description of the sudden, unexpected event: Explanation of how the event caused unsafe conditions or would cause equipment damage or unreasonable financial bu 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 Signature Date Date						
EMERGENCY DEMOLITION/RENOVATIONS: Date of Emergency:	Authorite					
Explanation of the sudden, unexpected event: Explanation of how the event caused unsafe conditions or would cause equipment damage or unreasonable financial bu 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 Signature Signature Date	Date of Orde	24	Data Dama Billian A. B			
Explanation of how the event caused unsafe conditions or would cause equipment damage or unreasonable financial bu 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 Signature Date	Date of Orde		Date Demolition to B	legin:/		
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 Signature Date	Description of	DEMOLITION/RENOVATIONS: Date of the sudden, unexpected event:	e of Emergency://	, Time:		
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 Signature Date	Explanation (of how the event caused unsafe condi	tions or would cause equipmen	tt damage or upressenable financial bu		
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 Signature Date		The control of the co				
(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 Signature 6-28-17 Date		100%				
BILLY SHUMATE, CONTRACTOR Type or Print Name & Title Contractor	(40 CFR 61 S	ubpart M) will be on site during the	demolition or renovation and	d evidence that the required		
BILLY SHUMATE, CONTRACTOR Type or Print Name & Title Signature 6-28-17 Date				-		
Type or Print Name & Title Signature Date	I certify that	all of the above information is corre	ect.			
			ect. P-M. N	6-28-17		
MAIL TO: Office of Pollution Control Physical Address 515 Amite Street	BILLY	SHUMATE, CONTRACTOR	Signature			

P.O. Box 2261 Jackson, MS 39225

(601) 961-5171

Jackson, MS 39201