

# MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

Mail notification to: MDEQ Asbestos Section, 515 E. Amite Street, Jackson, MS 39201

Operator Project #	Postmark	Date Received (MDEQ use only)	Notification # (MDEQ use only)	
I. Type of Notification (O=Original R=Revised C=Canceled A= Annual) <span style="float: right;">O R</span>				
II. TYPE OF OPERATION (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation) <span style="float: right;">D</span>				
III. FACILITY DESCRIPTION (Include building name, number and floor or room number)				
Bldg. Name: Natchez Community Hospital				
Address: 129 Jefferson Davis Blvd.				
City: Natchez	State: MS	Zip:		
Site Location:			Tel:	
Building Size: 40,000 sq ft	# of Floors: 2	Age in Years: 40+		
Present Use: Vacant	Prior Use: hospital			
IV. FACILITY INFORMATION (Identify owner, removal contractor, and other operator)				
OWNER NAME: Merit Health Natchez				
Address: 54 Sgt. Prentiss Dr.				
City: Natchez	State: MS	Zip: 39120		
Contact: Jason Lynch	Tel: 601-443-2604			
REMOVAL CONTRACTOR: Environmental Management Plus, Inc.				
Address: P.O. Box 9361				
City: Jackson	State: MS	Zip: 39216		
Contact: Alfred Martin	Tel: 601-922-1919			
OTHER OPERATOR: Southern Land Management				
Address: 136 Auburn Ave.				
City: Natchez	State: MS	Zip: 39120		
Contact: Jody Foster	601-334-1252			
V. IS ASBESTOS PRESENT? (Yes/No) <span style="float: right;">yes</span>				
VI. PROCEDURE, INCLUDING ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL (Include inspector name and date of inspection):				
J.P. McCarley (ABI-8003) 10/20/17 - PLM				
VII. APPROXIMATE AMOUNT OF ASBESTOS INCLUDING:				
1. Regulated ACM to be Removed 2. Category I ACM Not Removed 3. Category II ACM Not Removed	RACM To Be Removed	Nonfriable Asbestos Material Not To Be Removed		Indicate Unit of Measurement Below
		Category I	Category II	
Pipes	PSI duct mastic			Ln Ft: 2850 Ln M:
Surface Area	FT. Mastic	Transite/Roxy (2500 sq ft)		Sq Ft: 31,000 Sq M:
Vol RACM Off Facility Component			Cu Ft:	Cu M:
VIII. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: 12/21/17				Complete: 1/31/18
IX. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: 2/1/18				Complete: 4/30/18

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:

Wet removal of ACM followed by demolition

XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION OR RENOVATION SITE:

Critical barrier containment

XII. WASTE TRANSPORTER #1

Name: Bluff City Equipment Rental  
Address: P.O. Box 1443  
City: Natchez, MS State: Zip:  
Contact Person: Kole Tel: 601-807-7697

WASTE TRANSPORTER #2

Name: N/A  
Address:  
City: State: Zip:  
Contact Person: Tel:

XIII. WASTE DISPOSAL SITE

Name: Riverbend Environmental Services landfill  
Address: 4451 Hwy 61  
City: Fayette State: MS Zip:  
Tel:

XIV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW:

Name: N/A Title:  
Authority:  
Date of Order (MM/DD/YY): Date Ordered 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 ASBESTOS MATERIAL BECOMES CRUMBLER, PULVERIZED, OR REDUCED TO POWDER:

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.

Alfred L. Martin Alfred L. Martin 12/11/17  
Type or Print Name (Signature of Owner/Operator) (Date)

XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT:

Alfred L. Martin Alfred L. Martin 12/11/17  
Type or Print Name (Signature of Owner/Operator) (Date)  
12/13/17