

73470

STATE OF MISSISSIPPI DEMOLITION/RENOVATION NOTIFICATION FORM

Please type or print legibly.

Incomplete notices will not meet notification requirements.

RECEIVED
APR 16 2018
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 West Enterprises, LLC structure
Description: Textured ceiling finish to be abated prior to building demolition (demolition by others)
Address: 5500 Claesholm Drive
City: Gautier County: Jackson State: MS ZIP: 39553
Contact Person: Jocely Talley Telephone: 228-762-0754

IV. **OWNER INFORMATION:** Name: City of Gautier, MS
Full Mailing Address: 3330 US Highway 90, Gautier, MS 39553
Contact Person: Construction Manager Telephone: 228-497-8000

V. **ASBESTOS REMOVAL CONTRACTOR:** Name: Hernandez Demolition & Remediation, LLC/Michael J. Brown
Certification No.: ABC-00001670 Expiration Date: 5-04-2018
Full Mailing Address: 19 Minor Hill Road, Hartselle, AL 35640
Contact Person: Michael J. Brown Telephone: 251-379-7038

VI. **CONTRACTOR (Other):** Name: J.E. Talley Construction, Inc.
Full Mailing Address: 1711 Prospect Avenue, Pascagoula, MS 39567
Contact Person: Jocely Talley Telephone: 228-762-0754

VII. **ASBESTOS REMOVAL PROJECT DATES (MM/DD/YY):**
Removal Project Start: 4 / 12 / 18 Removal Project Stop: 4 / 16 / 18

VIII. **DEMOLITION/RENOVATION PROJECT DATES (MM/DD/YY):**
Project Start: 4 / 17 / 18 Project Stop: 4 / 27 / 18 Prep. Date: 4 / 11 / 18

IX. **BUILDING INFORMATION:** Bldg. Size (SQ FT): 1,452 Bldg. Size (LNFT): _____
No. of Floors: 1 Age in Years: 41
Present Use: Vacant Prior Use: Office/Residence

X. **ASBESTOS INSPECTION:**
Was site inspected to determine presence of asbestos: ☒ Yes ☐ No
Inspection Date: 11 / 18 / 16 Asbestos Present? ☒ Yes ☐ No
Inspector: Charles D. Bingham Cert. No.: ABI-00001348 Expiration Date: 3/10/2017
Identify suspect materials sampled: roof shingles, ceiling texture, sheet rock, joint compound, vinyl flooring
Laboratory Analysis: TEM PLM X Other _____
Name of Laboratory: Micro-Methods

XI. **QUANTITY OF RACM TO BE REMOVED:**
Pipes (LN FT) _____ Surface Area (SQ FT) 1,200 textured ceiling finish
Volume of Facility Components(CU FT) _____

XII. **QUANTITY OF NONFRIABLE ASBESTOS** ☐ NOT REMOVED ☐ TO BE REMOVED:
Category I: _____ Category II: _____

XIII. **WASTE TRANSPORTER:** Name: Hernandez Demolition & Remediation, LLC
Full Mailing Address: 19 Minor Hill Road, Hartselle, AL 35640
Contact Person: Gilberto Hernandez Telephone: 256-303-1509

STATE OF MISSISSIPPI DEMOLITION/RENOVATION FORM - CONTINUED

XIV. WASTE ASBESTOS DISPOSAL SITE: Name: Dirt, Inc. Schillingers Road Landfill
 Physical Location: 8081 Cottage Hill Road, Mobile, AL 36695
 Full Mailing Address: 8081 Cottage Hill Road, Mobile, AL 36695
 Contact Person: Steve May Telephone: 251-633-7474
 *All asbestos waste should go to a permitted sanitary landfill.

XV. DISPOSAL SITE FOR DEMOLITION DEBRIS (Other than asbestos):
 Name: Applewhite Landfill
 Physical Location: 4501 Beasley Road, Gautier, MS 39553
 Full Mailing Address: P.O. Box 696, Gautier, MS 39553
 Contact Person: Roger Applewhite Telephone: 228-818-5393
 *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 checked="" type="checkbox"/> Bulldozer
<input checked="" type="checkbox"/> Containment	<input type="checkbox"/> Glove Bag	<input type="checkbox"/> Explode	<input checked="" 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:
Abatement of friable asbestos containing textured ceiling finish prior to demolition by others.
Textured ceiling will be removed in negative pressure containment using wet methods and placed into properly labeled doubled 6 mil disposal bags.

XVIII. PROCEDURES TO BE FOLLOWED IF UNEXPECTED ACM IS FOUND OR NONFRIABLE ACM BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO A POWDER OR SMALL PIECES:
Stop work in area. Test unexpected material or investigate process. Notify Owner & MDEQ of any changes to scope or process.
 *Will MDEQ be notified of any significant changes? ☒ 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.

Michael J. Brown/Operations Manager

Type or Print Name & Title


 Signature

4-13-2018
 Date

MAIL TO: Office of Pollution Control Physical Address 515 Amite Street
 P.O. Box 2261
 Jackson, MS 39225
 (601) 961-5171