# MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

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

| Operator Project # G.S.C. Job #20-320 | Postmark 7/01/2020 | Date Received (MDEQ use only) | Notification # (MDEQ use only) |
|---|---|---|---|

I. Type of Notification (O=Original R=Revised C=Canceled A= Annual) R-002

II. TYPE OF OPERATION (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation) D

III. FACILITY DESCRIPTION (Include building name, number and floor or room number)

Bldg. Name: Parcel # 014-00-00-W

Address 17900 Highway 19 South

City: Philadelphia | State: MS | Zip: 39350

Site Location: one story framed residence - IMP# 8144(has ACM), 8145, 8146, 8147, 8148, and 8149 | Tel: 601-359-7563

Building Size 11,461 total SF for all six structures on this parcel | # of Floors: 1 | Age in Years: 55 +/-

Present Use: Vacant Private Residence | Prior Use: Private Residence

IV. FACILITY INFORMATION (Identify owner, removal contractor, and other operator)

OWNER NAME: Mississippi Department of Transportation-Neshoba County MDOT Project # 103896-201000

Address: Consultant Services Unit- 90-01, Suite 10083 - 401 North West Street

City: Jackson | State: MS | Zip: 39201

Contact: Blane Jackson | Tel: 601-359-7563

REMOVAL CONTRACTOR Gulf Services Contracting, Inc.

Address: 5000 Rangeline Rd

City: MOBILE | State: AL | Zip: 36619

Contact: Sean Brandon | Tel: 251-443-8161

OTHER OPERATOR:

Address:

City: | State: | Zip:

Contact:

V. IS ASBESTOS PRESENT? (Yes/No) YES

VI. PROCEDURE, INCLUDING ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL (Include inspector name and date of inspection):

BULK, PLM, EarthCon Consultants, Inc. DATED 12/17/19 By Anna C Serrano

| VII. APPROXIMATE AMOUNT OF ASBESTOS INCLUDING:<br>1. Regulated ACM to be Removed<br>2. Category I ACM Not Removed<br>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 | UNIT | |
| Pipes | | | | LnFt: | Ln M: |
| Surface Area | Linoleum flooring & Mastic | | | SqFt: 204 | Sq M: |
| Vol RACM Off Facility Component | | | | CuFt: | Cu M: |

VIII. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: 7/31/2020 Complete: 8/1/2020

IX. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: 8/1/2020 Complete: 8/28/2020

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

ABATEMENT AND DEMOLITION

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

Negative Pressure containment, wet method, remove intact

XII. WASTE TRANSPORTER #1

Name: Gulf Services Contracting, Inc.

Address: 5000 Rangeline Road

| City: Mobile | State: Al | Zip: 36619 |
|---|---|---|
| Contact Person: Sean Brandon | | Tel: 251-443-8161 |

WASTE TRANSPORTER #2

Name: AmWaste

Address: 1000 S. Lawrence Street

| City: Mobile | State: Al | Zip: 36603 |
|---|---|---|
| Contact Person: Jordan Collins | | Tel: 251-487-0047 |

XIII. WASTE DISPOSAL SITE

Name: Turkey Trot Landfill

Address: 2328 Mannish Ryan Road

| City: Citronelle | State: Al | Zip: 36522 |
|---|---|---|

Tel: 251-366-6180

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: N/A

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:

N/A

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 WORK. TEST MATERIALS. NOTIFY OWNER AND MDEQ OF ANY CHANGES.

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.

Sean Brandon — Sean Brandon — 7/20/2020

Type or Print Name — (Signature of Owner/Operator) — (Date)

XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT:

Sean Brandon — Sean Brandon — 7/20/2020

Type or Print Name — (Signature of Owner/Operator) — (Date)