

# 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) <b>O</b>				
II. TYPE OF OPERATION (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation)				
III. FACILITY DESCRIPTION (Include building name, number and floor or room number)				
Bldg. Name: <b>Residential House</b>				
Address: <b>2204 ROBINSON ST</b>				
City: <b>Jackson</b>	State: <b>MS</b>	Zip: <b>39209</b>		
Site Location: <b>Same as above</b>			Tel:	
Building Size: <b>2,392</b>	# of Floors: <b>1</b>	Age in Years: <b>75</b>		
Present Use: <b>Vacant</b>	Prior Use: <b>Residential</b>			
IV. FACILITY INFORMATION (Identify owner, removal contractor, and other operator)				
OWNER NAME: <b>TURNER MICHEL</b>				
Address: <b>1151 MELOAN DR</b>				
City: <b>JACKSON</b>	State: <b>MS</b>	Zip: <b>39209</b>		
Contact: <b>CITY OF JACKSON</b>			Tel: <b>601-960-1054</b>	
REMOVAL CONTRACTOR: <b>R&amp;C SERVICES LLC</b>				
Address: <b>P O BOX 7038</b>				
City: <b>Jackson</b>	State: <b>MS</b>	Zip: <b>39282</b>		
Contact: <b>Raymond Granderson</b>			Tel: <b>6624587773</b>	
OTHER OPERATOR: <b>Raymond Granderson</b>				
Address: <b>987 Gore Rd</b>				
City: <b>Jackson</b>	State: <b>MS</b>	Zip: <b>39212</b>		
Contact: <b>Raymond Granderson</b>				
V. IS ASBESTOS PRESENT? (Yes/No) <b>YES</b>				
VI. PROCEDURE, INCLUDING ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL (Include inspector name and date of inspection):				
<b>SAMANTHA GRAVES- 2/28/20 EPA 600/R-93/116 METHOD USING POLARIZED LIGHT MICROSCOPY</b>				
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	UNIT
Pipes				Ln Ft:      Ln M:
Surface Area	138			Sq Ft: <b>X</b> Sq M:
Vol RACM Off Facility Component				Cu Ft:      Cu M:
VIII. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start:		December 7, 2020	Complete: December 8, 2020	
IX. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start:		December 8, 2020	Complete: December 9, 2020	

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:  
Complete demolition of building using excavator and heavy equipment.

XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION OR RENOVATION SITE: Water spray will be used to control all dust from demolition activities. Waste material will be handled using wet methods, hepa vacuuming, container labeling, and will be transported to a licensed landfill.

XII. WASTE TRANSPORTER #1

Name: City of Byram/Jackson Landfill

Address: I-55 S Frontage Rd

City: Byram

State: MS

Zip: 39272

Contact Person:

Tel: 601-373-5863

WASTE TRANSPORTER #2

Name:

Address:

City:

State:

Zip:

Contact Person:

Tel:

XIII. WASTE DISPOSAL SITE

Name: City of Jackson Landfill

Address: I-55 S Frontage Rd

City: Byram

State: MS

Zip: 39272

Tel: 601-373-5863

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

Name: ROBERT BRUNSON

Title: Code Enforcement Supervisor

Authority: CITY OF JACKSON

Date of Order (MM/DD/YY): 9/29/2020

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 CRUMBLLED, PULVERIZED, OR REDUCED TO POWDER:

All material will be treated, handled, and landfilled as asbestos containing waste.

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.

Type or Print Name

Raymond Granderson  
(Signature of Owner/Operator)

11/19/2020

(Date)

XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT:

Type or Print Name

Raymond Granderson  
(Signature of Owner/Operator)

11/19/2020

(Date)

## Landroll Detail

Parcel Number 128-193	Map Reference Number 660.00 1 219.00
Subdivision No. 1602	Homestead Exemption Account Numbers
Assessed Owner <b>TURNER MICHEL</b> 1151 MELOAN DR JACKSON MS 39209	Assessed Values Land Value 1,053 Improvement Value 2,414 Total 3,467
Location 2204 <b>ROBINSON ST</b> AD	Appraised Values Land Value 7,020 Improvement Value 16,090 Total 23,110
Legal Description LOT 1 BLK B ROSEDALE GARDENS	Building Info. Type APT Base Area 2,392 Adjusted Area 2,432 Year Built 1945
Acreage Info.	Deed Info. Book & Page 2766-0529 Date 09/02/1980
Cultivated Acres 0.00	
Uncultivated Acres 0.00	

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