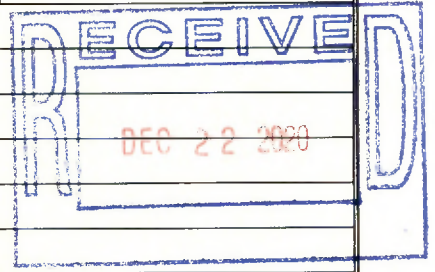


# MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

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>Original</b>			
II. TYPE OF OPERATION (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation) <b>Demolition</b>			
III. FACILITY DESCRIPTION (Include building name, number and floor or room number)			
Bldg. Name: <b>Building 2206</b>			
Address <b>Endeavor Drive</b>			
City: <b>Stennis Space Center</b>	State: <b>MS</b>	Zip: <b>39529</b>	
Site Location: <b>Building 2206, Endeavor Drive</b>			Tel: <b>(228)688-1655</b>
Building Size <b>1364</b>	# of Floors: <b>1</b>	Age in Years: <b>40+</b>	
Present Use: <b>Vacant</b>	Prior Use: <b>Paint Shop</b>		
IV. FACILITY INFORMATION (Identify owner, removal contractor, and other operator)			
OWNER NAME: <b>National Aeronautics Space Administration (NASA)</b>			
Address: <b>Building 1100, Room 302 1H</b>			
City: <b>Stennis Space Center</b>	State: <b>MS</b>	Zip: <b>39529</b>	
Contact: <b>David Lorange</b>			Tel: <b>(228)688-1655</b>
REMOVAL CONTRACTOR <b>Global Contracting, LLC</b>			
Address: <b>226 Harry Sones Road</b>			
City: <b>Carriere</b>	State: <b>MS</b>	Zip: <b>39426</b>	
Contact: <b>Eddie Blossman</b>			Tel: <b>(601)795-3401</b>
OTHER OPERATOR: <b>Bean Excavating</b>			
Address: <b>18370 Fenton Deadeaux Road</b>			
City: <b>Kiln</b>	State: <b>MS</b>	Zip: <b>39556</b>	
Contact: <b>Jamie Bean (228)493-8127</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>Inspector: James Clark (ABI# 00003456), Inspection Date: 10/22/18</b>			
VII. APPROXIMATE AMOUNT OF ASBESTOS INCLUDING:		Nonfriable Asbestos Material Not To Be Removed	
<ol style="list-style-type: none"> <li>1. Regulated ACM to be Removed</li> <li>2. Category I ACM Not Removed</li> <li>3. Category II ACM Not Removed</li> </ol>		RACM To Be Removed	Indicate Unit of Measurement Below
			Category I
Pipes	TSI		LnFt: <b>100</b> Ln M:
Surface Area			SqFt:              Sq M:
Vol RACM Off Facility Component			CuFt:              Cu M:
VIII. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: <b>12/31/20</b>		Complete: <b>3/31/21</b>	
IX. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: <b>12/31/20</b>		Complete: <b>3/31/21</b>	



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

Demolition of B3146, Wet removal of asbestos containing roofing tar.

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

Wet removal methods, air monitoring, double bagging.

XII. WASTE TRANSPORTER #1

Name: Global Contracting, LLC

Address: 226 Harry Sones Road

City: Carriere

State: MS

Zip: 39426

Contact Person: Eddie Blossman

Tel: (601)795-3401

WASTE TRANSPORTER #2

Name:

Address:

City:

State:

Zip:

Contact Person:

Tel:

XIII. WASTE DISPOSAL SITE

Name: Stennis Space Center, On-Site Landfill

Address: Building 2070, End of Endeavor Road

City: Stennis Space Center

State: MS

Zip: 39529

Tel: (228)688-2532

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

Name:

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:

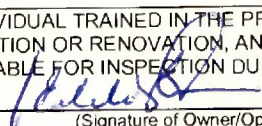
Explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden:

XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLLED, PULVERIZED, OR REDUCED TO POWDER:

Stop work immediately, contact regulatory authorities wait for approval to resume work.

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.

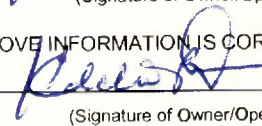
Eddie Blossman  
Type or Print Name

  
(Signature of Owner/Operator)

12/16/20  
(Date)

XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT:

Eddie Blossman  
Type or Print Name

  
(Signature of Owner/Operator)

12/16/20  
(Date)