

MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

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

Operator Project #	Postmark <i>1/26/2022</i>	Date Received (MDEQ use only) <i>1/27/2022</i>	Notification # (MDEQ use only)
I. Type of Notification (O=Original R=Revised C=Canceled A= Annual) O			
II. TYPE OF OPERATION (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation) Renovation			
III. FACILITY DESCRIPTION (Include building name, number and floor or room number)			
Bldg. Name: Woodville Town Hall			
Address 510 Main Street			
City: Woodville	State: MS	Zip: 39669	
Site Location:		Tel: 601-888-3338	
Building Size Unknown	# of Floors: 2	Age in Years:	
Present Use: Town Hall	Prior Use: Unknown		
IV. FACILITY INFORMATION (Identify owner, removal contractor, and other operator)			
OWNER NAME: Town of Woodville			
Address: 510 Main Street			
City: Woodville	State: MS	Zip: 39669	
Contact: Stuart Allen (GC-228-861-2020)		Tel: 601-888-3338	
REMOVAL CONTRACTOR Snyder Environmental & Construction, LLC			
Address: 7705 Northshore Place			
City: North Little Rock	State: AR	Zip: 72118	
Contact: Justin Dixon		Tel: 501-801-2776	
OTHER OPERATOR: N/A			
Address: N/A			
City: N/A	State: N/A	Zip: N/A	
Contact: N/A			
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):			
Andrew Abels-Assumed 12/20/2021			
VII. APPROXIMATE AMOUNT OF ASBESTOS INCLUDING:		Nonfriable Asbestos Material Not To Be Removed	
<ol style="list-style-type: none"> 1. Regulated ACM to be Removed 2. Category I ACM Not Removed 3. Category II ACM Not Removed 		RACM To Be Removed	
		Category I	Category II
Pipes			LnFt: Ln M:
Surface Area		9x9 Floor Tile	SqFt: 342 Sq M:
Vol RACM Off Facility Component			CuFt: Cu M:
VIII. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: 2/14/2022		Complete: 2/14/2022	
IX. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start:		Complete:	

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Dept. of Environmental Quality

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

Materials listed above to be removed by hand so facility can be renovated

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

Materials will be wetted before/during/ after abatement, properly pkge, labeled and transported to Certified Class 1 Landfill.

XII. WASTE TRANSPORTER #1

Name: Snyder Environmental & Construction, LLC

Address: 7705 Northshore Place

City: North Little Rock

State: AR

Zip: 72118

Contact Person: Justin Dixon

Tel: 501-801-2776

WASTE TRANSPORTER #2 N/A

Name: N/A

Address: N/A

City: N/A

State: N/A

Zip: N/A

Contact Person: N/A

Tel:

XIII. WASTE DISPOSAL SITE

Name: Two Pine Landfill

Address: 100 Two Pine Drive

City: North Little Rock

State: AR

Zip: 72117

Tel: 501982-7336

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

Name: N/A

Title: N/A

Authority: N/A

Date of Order (MM/DD/YY): N/A

Date Ordered to Begin (MM/DD/YY): N/A

XV. FOR EMERGENCY RENOVATIONS: N/A

Date and Hour of Emergency (MM/DD/YY): N/A

Description of the sudden unexpected event: N/A

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 ASBESTOS MATERIAL BECOMES CRUMBLLED, PULVERIZED, OR REDUCED TO POWDER:

Wet the unexpected, make safe the area and notify DEQ.

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.

Barbara McElroy
Type or Print Name

Barbara McElroy
(Signature of Owner/Operator)

1/26/2022

(Date)

XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.

Barbara McElroy

Barbara McElroy
(Signature of Owner/Operator)

1/26/2022

(Date)