

# MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

Mail notification to: MDEQ Asbestos and Lead Branch, 515 E. Amite Street, Jackson, MS 39201

MDEQ Use Only <input checked="" type="checkbox"/> Email <input checked="" type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery	Postmark (mail only) 4.15.2022	Date Received 4.15.22 4.18.22 mail	AI Number
I. Type of Notification (O=Original R=Revised C=Canceled A= Annual): <b>O</b>			<b>RECEIVED</b>
II. TYPE OF OPERATION (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation): <b>D</b>			APR 10 2022
III. FACILITY DESCRIPTION (Include building name, number and floor or room number):			DEPT. OF ENVIRONMENTAL QUALITY
Bldg. Name: <b>N/A</b>			
Address: <b>7516 Siwell Rd.</b>			
City: <b>Byrum</b>	State: <b>Mississippi</b>	Zip: <b>39272</b>	
Site Location: <b>NE corner of I-55 South Frontage Road and South Siwell Road</b>			Tel:
Building Size: <b>3,530 sf</b>	# of Floors: <b>1</b>	Age in Years: <b>72</b>	
Present Use: <b>C-4 Major Thoroughfares Commercial District</b>		Prior Use: <b>R-E (Residential Estate Classification)</b>	
IV. FACILITY INFORMATION (Identify owner, asbestos removal contractor, and other operator)			
OWNER NAME: <b>QuikTrip Corporation</b>			
Address: <b>4705 S. 129th E. Ave</b>			
City: <b>Tulsa</b>	State: <b>Oklahoma</b>	Zip: <b>74134</b>	
Contact: <b>Kris Davis</b>		Tel: <b>469-744-2162</b>	
ASBESTOS REMOVAL CONTRACTOR: <b>Eagle Construction</b>			
Address: <b>1450 Old Brandon Rd</b>			
City: <b>Flowood</b>	State: <b>Mississippi</b>	Zip: <b>39232</b>	
Contact: <b>Chuck Womack</b>		Tel: <b>601-940-5411</b>	
Certification Number: <b>ABC-00002432</b>		Expiration Date: <b>11/12/2022</b>	
OTHER OPERATOR: <b>N/A</b>			
Address: <b>N/A</b>			
City: <b>N/</b>	State: <b>N/A</b>	Zip: <b>N/A</b>	
Contact: <b>N/A</b>		Tel: <b>N/A</b>	
V. WAS SITE INSPECTED TO DETERMINE PRESENCE OF ASBESTOS? (Yes/No): <b>Yes</b>			
WAS ASBESTOS PRESENT? (Yes/No): <b>Yes</b>		Inspection Date: <b>8/17/2021</b>	
Inspector: <b>William F Penick</b>	Certification Number: <b>ABI-00009048</b>	Expiration Date: <b>5/13/2022</b>	
VI. SUSPECT MATERIALS SAMPLED AND PROCEDURES USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL: Tan Drywall Joint Compound, Brown linoleum and masic under floor tiles, Tan 12" x 12" floor tiles, White Drywall Joint Compound, Exterior Transite Siding			
Samples of suspect ACMs were collected utilizing hand tools and placed into individual labeled plastic bags. ACM samples were submitted to EMSL Analytical, Inc in Baton Rouge, LA for Polarized Light Microscopy in accordance with EPA-600 methodology.			
VII. QUANTITY OF RACM TO BE REMOVED:			
Pipes (LN FT): <b>0</b>	Surface Area (SQ FT): <b>2,700</b>	Volume of Facility Components (CU FT): <b>0</b>	
VIII. QUANTITY OF NONFRIABLE ASBESTOS NOT REMOVED:			
Category I: <b>260</b>		Category II: <b>0</b>	
IX. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: <b>6/28/2021</b>		Complete: <b>7/6/2021</b>	
X. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: <b>5/2/2022</b>		Complete: <b>5/13/2022</b>	

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

Demolition of 2 residential buildings

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

6-mil polyethylene sheeting work barriers, negative pressure achieved with poly sheeting barriers and negative air machines, throughly wetting ACM with Amended Water

**XIII. WASTE TRANSPORTER #1**

Name: H&M construction Co., LLC

Address: 10429 MS-494

City: Meridian

State: Mississippi

Zip: 39305

Contact Person: Steve Smith

Tel: 601-416-8015

**WASTE TRANSPORTER #2**

Name:

Address:

City:

State:

Zip:

Contact Person:

Tel:

**XIV. WASTE DISPOSAL SITE**

Name: Little Dixie Sanitary Landfill

Address: 1716 N County Line

City: Ridgeland

State: Mississippi

Zip: 39157

Contact Person:

Tel: 601-982-9488

**XV. 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

**XVI. 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

**XVII. 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, notify and consult with MDEQ, sample and test for asbestos by certified inspector and testing lab, and ameliorate as per recomendations.

**XVIII. 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.**

Shawn Rosbrough

Type or Print Name

(Signature of Owner/Operator)

4/15/2022

(Date)

**XIX. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT:**

Shawn Rosbrough

Type or Print Name

(Signature of Owner/Operator)

4/15/2022

(Date)