

# MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

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

Operator Project #	Postmark <b>02.2022</b>	Date Received (MDEQ use only) <b>6.6.2022</b>	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>Renovation</b>				
III. FACILITY DESCRIPTION (Include building name, number and floor or room number)				
Bldg. Name: <b>Delmar Plaza</b>				
Address: <b>12057 Hwy. 49 Suite E</b>				
City: <b>Gulfport</b>	State: <b>MS</b>	Zip: <b>39503</b>		
Site Location: <b>Delmar Plaza Dining Area</b>			Tel:	
Building Size: <b>100,000 sq ft</b>	# of Floors: <b>1</b>	Age in Years: <b>40+</b>		
Present Use: <b>Shopping Center</b>	Prior Use: <b>Shopping Center</b>			
IV. FACILITY INFORMATION (Identify owner, removal contractor, and other operator)				
OWNER NAME: <b>Delmar PLaza Holdings, LLC</b>				
Address: <b>225 Springhill Memorial Place</b>				
City: <b>Mobile</b>	State: <b>AL</b>	Zip: <b>36608</b>		
Contact: <b>Scott Delaney</b>			Tel: <b>(251)599-3240</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>Vision Constructors</b>				
Address: <b>608 34th Street</b>				
City: <b>Gulfport</b>	State: <b>MS</b>	Zip: <b>39501</b>		
Contact: <b>John Rollins</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: Dave Bingham, Micro-Methods Laboratories, Date of Inspection: 05/25/22</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	
Pipes				Ln Ft:      Ln M:
Surface Area <b>floor tile/mastic</b>				Sq Ft: <b>2840</b> Sq M:
Vol RACM Off Facility Component				Cu Ft:      Cu M: <b>2</b>
VIII. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: <b>06/15/2022</b> Complete: <b>07/30/2022</b>				
IX. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: <b>06/15/2022</b> Complete: <b>07/30/2022</b>				

**RECEIVED**  
**JUN 06 2022**  
 Dept. of Environmental Quality

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

Removal of approximately 2,840 sq ft of floor tile and black mastic located in the dinning area.

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

PPE, Wet-removal methods, containments, area and clearance monitoring.

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: Waste Management-Pecan Grove Landfill

Address: 9685 Firetower Road

City: Pas Christian

State: MS

Zip: 3945739571

Tel: (601)795-2500

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

*Eddie Blossman*  
(Signature of Owner/Operator)

6/2/22

(Date)

XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT:

Eddie Blossman

*Eddie Blossman*  
(Signature of Owner/Operator)

6/2/22

(Date)