

MAP

### 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 type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery		Postmark (mail only)	Date Received 2-3-23	AI Number
I. Type of Notification (O=Original R=Revised C=Canceled A= Annual): ORIGINAL				
II. TYPE OF OPERATION (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation): D= DEMOLITION				
III. FACILITY DESCRIPTION (Include building name, number and floor or room number): OLD HWY 80 SCALE BLD				
Bldg. Name: SCALE BLDG. OLD HWY 80, LAUDERDALE CT, MISS.				
Address: ON Highway 80 1 mile east of THE KEWANEE EXIT. WEST SHOULDER				
City: KEWANEE		State: MS		Zip:
Site Location: OLD HWY 80 EAST OF I-20			Tel:	
Building Size: 700 SF		# of Floors: 1		Age in Years: 50 YRS
Present Use: VACANT		Prior Use: TRUCK SCALE BUILDING		
IV. FACILITY INFORMATION (Identify owner, asbestos removal contractor, and other operator)				
OWNER NAME: MISS. DEPT OF TRANSPORTATION. RIGHT OF WAY DIVISION				
Address: P.O. BOX 1850				
City: JACKSON, MS		State: MS		Zip: 39215-1850
Contact: BLANIE JACKSON		Tel:		
ASBESTOS REMOVAL CONTRACTOR: M AND M SERVICES, Inc.				
Address: P.O. BOX 68431				
City: JACKSON, MS		State: MS		Zip: 39286
Contact: DALE MCGUFFIE		Tel: 601-982-8695		
Certification Number: ABC-00007007			Expiration Date: 3-17-23	
OTHER OPERATOR: NA				
Address:				
City:		State:		Zip:
Contact:		Tel:		
V. WAS SITE INSPECTED TO DETERMINE PRESENCE OF ASBESTOS? (Yes/No): YES				
WAS ASBESTOS PRESENT? (Yes/No): YES			Inspection Date:	
Inspector: WILLIE NESTER		Certification Number: AB1 0000 2244		Expiration Date: 1-18-24
VI. SUSPECT MATERIALS SAMPLED AND PROCEDURES USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL: SAMPLED FLOORING, ROOFING, WALLS, GLAZING, CAULK				
VII. QUANTITY OF RACM TO BE REMOVED: 450 SF FLOOR TILE + MASTIC				
Pipes (LN FT):		Surface Area (SQ FT): 450		Volume of Facility Components (CU FT):
VIII. QUANTITY OF NONFRIABLE ASBESTOS NOT REMOVED:				
Category I:			Category II:	
IX. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: Feb 14, 2023 Complete: Feb 15, 2023				
X. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: Feb 14, 2023 Complete: MARCH 30, 2023				

XI. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:  
DEMOLISH BUILDING & WEIGHT SCALE

XII. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION OR RENOVATION SITE:  
ESTABLISH CONTAINMENT, REMOVE MATERIAL WET.

XIII. WASTE TRANSPORTER #1

Name: M & M SERVICES, Inc

Address: Box 68431

City: JACKSON, State: MS Zip: 39286

Contact Person: DALE MCGUFFIE Tel: 601-982-8695

WASTE TRANSPORTER #2 NA

Name:

Address:

City: State: Zip:

Contact Person: Tel:

XIV. WASTE DISPOSAL SITE L

Name: LITTLE DIXIE LANDFILL

Address: 1716 NORTH COUNTY LINE Rd.

City: RIDGELAND State: MS Zip:

Contact Person: MIKE RILEY Tel: 601-613-8671

XV. 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):

XVI. 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:

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. WET MATERIAL. NOTIFY OWNER.

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

DALE MCGUFFIE (Type or Print Name) Dale McGuffie (Signature of Owner/Operator) Feb 1, 2023 (Date)

XIX. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT:

DALE MCGUFFIE (Type or Print Name) Dale McGuffie (Signature of Owner/Operator) Feb 1, 2023 (Date)