


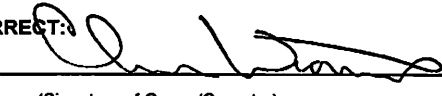
# MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

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

MDEQ Use Only: <input type="checkbox"/> Email <input type="checkbox"/> Mail <input checked="" type="checkbox"/> Hand Delivery		Postmark (mail only)	Date Received <b>4.7.23</b>	AI Number
I. Type of Notification (O=Original R=Revised C=Canceled A= Annual): <b>O</b>				
II. TYPE OF OPERATION (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation): <b>R</b>				
III. FACILITY DESCRIPTION (Include building name, number and floor or room number): <b>Univ of MS-Shoemaker Hall Rms 124 &amp; 126</b>				
Bldg. Name: <b>Shoemaker Hall - Rms 124 &amp; 126</b>				
Address: <b>30 University Ave</b>				
City: <b>University</b>		State: <b>MS</b>	Zip: <b>38677</b>	
Site Location: <b>30 University Ave, University, MS 38677</b>			Tel: <b>662-915-3276</b>	
Building Size: <b>100,000 sf</b>		# of Floors: <b>5</b>	Age in Years: <b>75 +/-</b>	
Present Use: <b>Lab/Classrooms</b>		Prior Use: <b>Lab/Classrooms</b>		
IV. FACILITY INFORMATION (Identify owner, asbestos removal contractor, and other operator)				
OWNER NAME: <b>University of Mississippi</b>				
Address: <b>700 Hathorn Rd</b>				
City: <b>Oxford</b>		State: <b>MS</b>	Zip: <b>38677</b>	
Contact: <b>Harry Meyer</b>			Tel: <b>662-915-2118</b>	
ASBESTOS REMOVAL CONTRACTOR: <b>Jeff Evans, Inc d/b/a Eagle Construction</b>				
Address: <b>1450 Old Brandon Rd</b>				
City: <b>Flowood</b>		State: <b>MS</b>	Zip: <b>39232</b>	
Contact: <b>Chuck Womack</b>			Tel: <b>601-940-5411</b>	
Certification Number: <b>ABC-1799</b>		Expiration Date: <b>3/4/2023</b>		
OTHER OPERATOR: <b>Worsham Brothers, Inc</b>				
Address: <b>P. O. Box 146</b>				
City: <b>Corinth</b>		State: <b>MS</b>	Zip: <b>38835</b>	
Contact: <b>Brady Spencer</b>			Tel: <b>662-286-8446</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>10/28/2022</b>	
Inspector: <b>L Gilliland</b>		Certification Number: <b>ABI-1036</b>	Expiration Date: <b>2/9/2023</b>	
VI. SUSPECT MATERIALS SAMPLED AND PROCEDURES USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL:				
<b>Flooring, sheetrock walls, ceiling tile, vent hoods, tabletops &amp; cove base</b>				<b>PLM</b>
VII. QUANTITY OF RACM TO BE REMOVED: <b>600 sf FT/M , 260 sf transite</b>				
Pipes (LN FT):		Surface Area (SQ FT):	Volume of Facility Components (CU FT):	
VIII. QUANTITY OF NONFRIABLE ASBESTOS NOT REMOVED: <b>N/A</b>				
Category I:			Category II:	
IX. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: <b>4/20/23</b>			Complete: <b>4/25/23</b>	
X. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: <b>4/20/23</b>			Complete: <b>8/30/23</b>	

**RECEIVED**  
**APR 07 2023**

Dept. of Environmental Quality

<b>XI. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:</b>		
Removal of asbestos containing materials with hand tools		
<b>XII. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION OR RENOVATION SITE:</b>		
Stop work and notify competent person, keep wet, seal all critical barriers & put under negative pressure		
<b>XIII. WASTE TRANSPORTER #1</b>		
Name: ADS, Inc		
Address: P. O. Box 1296		
City: Clinton	State: MS	Zip: 39060-1296
Contact Person: Mark Parkman	Tel: 601-925-0507	
<b>WASTE TRANSPORTER #2</b>		
Name: Eagle Construction		
Address: 1450 Old Brandon Rd		
City: Flowood	State: MS	Zip: 39232
Contact Person: Chuck Womack	Tel: 601-940-5411	
<b>XIV. WASTE DISPOSAL SITE</b>		
Name: Little Dixie Landfill		
Address: 1716 North County Line Rd		
City: Ridgeland	State: MS	Zip: 39157
Contact Person:	Tel: 601-982-9488	
<b>XV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW:</b>		
Name:	Title:	
Authority:		
Date of Order (MM/DD/YY):	Date Ordered to Begin (MM/DD/YY):	
<b>XVI. FOR EMERGENCY RENOVATIONS:</b>		
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:		
<b>XVII. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER:</b>		
Stop work & notify owner, keep wet and double bag immediately		
<b>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.</b>		
Chuck Womack		4/6/23
Type or Print Name	(Signature of Owner/Operator)	(Date)
<b>XIX. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT:</b>		
Chuck Womack		4/6/23
Type or Print Name	(Signature of Owner/Operator)	(Date)