## MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM Mail notification to: MDEO Asbestos and Lead Broads 515 E April Standard In 1885 April 1885 A

MDEQ Asbestos and Lead Branch, 515 E. Amite Street, Jackson, MS 39201 MDEQ Use Only: Postmark (mail only) **Date Received** Email Mail Hand Delivery 3/26/2024 I. Type of Notification (O=Original R=Revised C=Canceled A= Annual) R II. TYPE OF OPERATION (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation) III. FACILITY DESCRIPTION (Include building name, number and floor or room number) Bldg. Name: Columbus Housing Authority Address 1704 Wheat Street City: Columbus State: MS Zip: 39701 County: Site Location: Entire unit. Tel: Building Size Aprox 900 sq ft # of Floors: 1 Age in Years: Present Use: Residential Housing Prior Use: Residential Housing IV. FACILITY INFORMATION (Identify owner, asbestos removal contractor, and other operator) **OWNER NAME:** Columbus Housing Authority Address: 914 4th Street South City Columbus State: MS Zip: 39701 Contact: Larry Jones Tel: 662-328-4236 ASBESTOS REMOVAL CONTRACTOR: Southeast Environmental Group, Inc. Address: 296B 2nd Ave/P.O.Box 433 City: York State: AL Zip: 36925 Contact: Johnny Rodgers Tel: 205-392-9308 Certification Number: ABC00001906 Expiration Date: 06/02/2024 OTHER OPERATOR: Address: City: State: Zip: Contact: Tel: V. WAS SITE INSPECTED TO DETERMINE PRESENCE OF ASBESTOS? (Yes/No): NO WAS ASBESTOS PRESENT? (Yes/No): yes. Assumed base on report from other units Inspection Date: unknown Inspector: unknown Certification Number: Unkown Expiration Date: unkown VI. SUSPECT MATERIALS SAMPLED AND PROCEDURES USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL: The 9X12 floor tile and mastic was assumed to contain asbestos based on reports from previous testing from other units in the complex and visual inspections. VII. QUANTITY OF RACM TO BE REMOVED: approx 900 sq ft Pipes (LN FT): Surface Area (SQ FT): 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: 4/5/2024 Complete: 5/5/2024 X. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: n/a Complete: n/a

XI. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:			
process. The work area will be protected and sealed by using the capsule concept to assure the least to no particles escape			
XII. DESCRIPTION OF WORK PRACTICES AND ENGINEER DEMOLITION OR RENOVATION SITE:	ING CONTROLS TO	BE USED TO PREVENT EMIS!	SIONS OF ASBESTOS AT THE
the non-friable ACM will be removed by competent paragraph that it is a second to the competent paragraph that it is a			
to no particle escape. The concept of "keep it wet" will be used throughout the appeared and sealed by using the capsule concept to assure the least			
XIII. WASTE TRANSPORTER #1			
Name: Johnny Rodgers			
Address: 296B 2nd Ave			
<sub>City:</sub> York	State:AL	Zip: 36925	
Contact Person: Bertha Rodgers		Tel: 205-392-93	308
WASTE TRANSPORTER #2		-	
Name:			
Address:			
City:	State:	Zip:	
Contact Person:	olato.	Zip:	
XIV. WASTE DISPOSAL SITE			
Name: Kemper County Landfill			
Address:21211 Hwy 16 East			
<sub>City:</sub> Dekalb	State: MS	Zip: 39328	
Contact Person: Jimmy Thomas	Olato,	Tel: 601-743-431	10
XV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENC	Y, PLEASE IDENTIF		
Name:		Title:	
Authority:			
Date of Order (MM/DD/YY):	Date On	dered 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 dam	nage or an unreasonable financi	ial burden:
XVII. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN NONFRIABLE ASTESTOS MATERIAL BECOMES CRUMBLED	THE EVENT THAT U	JNEXPECTED ASBESTOS IS F	FOUND OR PREVIOUSLY
MDEQ will be immediately notified. The une			
way as the original.	Apoolog don't	tos will be broberry he	andled in the same
XVIII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PRO	TOONS OF TURE DE		
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.			
Bertha Kodgers	Berlla 1	odalis	3-26-24
	(Signature of Owner/Opera	ator	(Date)
KIX. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT	THE CHITCH	) 1	
Dertha Kodgers	berthy 1	Idylis	3-26-24
Type or Print Name	(Signature of Owner/Opera	rator)	(Date)