MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

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

Mail notification to: MDEQ Asb	estos and Lead Brandark (mail only)	Date Rec	eivea	Al Number 81856	
XEmail Mail Hand Delivery 01/16	6/2025 ABC received	BC received 01/07/20		01000	
. Type of Notification (O=Original R=Revised C=Cano	eled A= Annual): O		<u> </u>		
. TYPE OF OPERATION (D=Demo O= Ordered Demo	R=Renovation E=Emer.	Renovation):	T		
II. FACILITY DESCRIPTION (Include building name, no	umber and floor or room r	number):		_	
Bldg, Name: Highway Village Bldg G					
Address: 506 Front Street Extension	140		30301		
_{city:} Meridian	State: MS	State: MS		Zip: 39301 Tel: 601-693-4285	
to Location: Building G Windows					
Building Size: 7500 sf	# of Floors:2	ıki Family	Age in Years: 85 yrs		
Present Use: Multi Family Housing			y Housing		
IV. FACILITY INFORMATION (Identify owner, asbesto	s removal contractor, and	other operato	r)		
OWNER NAME: Meridian Housing Aut	thority				
Address: 606 16th St					
Address: God Fath G	State: MS		Zip: 39301		
Cade Mitchell			_{Tel:} 601-826-3964		
ASBESTOS REMOVAL CONTRACTOR: MAK En	vironmental, LLC	;			
Address: 17115 Finnell Rd			05475		
City: Northport	State: AL		Zip: 35475		
contact: Aubry L McCarley			Tel: 205-310-8863 Expiration Date: 1-15-25 01/10/2026		
Certification Number: ABC-00007308		Expirati	on Date: 1-15-25	01/10/2020	
OTHER OPERATOR: None					
Address: NA			-34		
City:	State:		Zip:		
Contact:		Voc	Tel:		
V. WAS SITE INSPECTED TO DETERMINE PRESE	NCE OF ASBESTOS? (Y	es/No): TES	ion Date: 6-24-24	4	
WAS ASBESTOS PRESENT? (Yes/No): YeS	A DI	0001140	5	4-23-25	
Inspector Rosie Jackson	ertification Number: ABI	CT THE PRE	SENCE OF ASBES	TOS MATERIAL:	
Lo -: Un a toyturo W/IDdOW/DODE CAUIN)	110011119 aria mas	tic was te	sted using Pl	_M method.	
Only the window caulk was positive	IOI aspesios.	- 4000B4B	C1 C0		
LBP inspection Date 5-28-24, Inspector	Rosie Jackson #LIN	I BP Sune	rvisor #PBS-000	007598 Exp 4-18-25	
• • • • • • • • • • • • • • • • • •	25 Audi y McCarto,	20. 0		t removal)	
VII. QUANTITY OF RACM TO BE REMOVED. Ca	aulking on 58 w	Mindows	(COMPONE)	Components (CU FT): 2.5 cuft	
	ace Area (SQ FT):0		Volume of Facility	Components (OO) 1).	
VIII. QUANTITY OF NONFRIABLE ASBESTOS NO	T REMOVED: U		0		
[Category II:	Comple	_{ote:} 2- 4- 25	
IX. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start:	25	Comple	ete: 5- 4 -25	
X. SCHEDULED DATES DEMO/RENOVATION (MI	M/DD/YY) Start: 4- 3-2		Comple	300.	

New windows will be installed after old wind	tion work, and lows are rem	oved and caulk is aba	ed.				
XII. DESCRIPTION OF WORK PRACTICES AND ENGINEERIN	IG CONTROLS TO	BE USED TO PREVENT EMISS	IONS OF ASBESTOS AT THE				
DEMOLITION OR RENOVATION SITE: Windows will be removed using wet method							
ground will be covered with plastic sheeting	to prevent c	ross contamination.	VIII DO OOGIOG GITG				
XIII. WASTE TRANSPORTER #1							
_{Name:} Burns Waste							
Address: 24 Burns Dr							
_{City:} Columbus	State: MS	Zip:39702					
Contact Person: Raygan Gibson	000 040 0404						
WASTE TRANSPORTER #2 None							
Name: NA							
Address:							
City:	State:	Zip:					
Contact Person:		Tel:					
XIV. WASTE DISPOSAL SITE							
_{Name:} Robo Landfill							
Address:6447 Wahalak Rd							
_{City:} Scooba	State: MS		Zip:39358				
Contact Person: Roland Edmonds		_{Tel:} 662-361-03	300				
XV. IF DEMOLITION ORDERED BY A GOVERNMENT AGEN	CY, PLEASE IDEN	TIFY THE AGENCY BELOW:					
Name: NA	Name: NA Title:						
Authority:							
Date 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:							
		de la companya de la	ooial burden:				
Explanation of how the event caused unsafe conditions or woul	d cause equipment	damage or an unreasonable lina	iciai burden.				
XVII. DESCRIPTION OF PROCEDURES TO BE FOLLOWED	IN THE EVENT TH	AT UNEVDECTED ASSESTOS	S FOLIND OR PREVIOUSLY				
NONEDIADLE ACTECTOS MATERIAL RECOMES CRIMRI	EN PIJI VERIZED.	OR REDUCED TO POWDER:					
Keep wet and expand containment. Notify	asbestos ins	spector to test suspect	material. If positive for				
asbestos, we will revise notification.							
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.							
Aubry L McCarley	Migh	Melal	1-6-25				
Type or Print Name	(Signature of Owner	(Operator)	(Date)				
XIX. I CERTIFY THAT THE ABOVE INFORMATION IS CORR Aubry L McCarley	16.25						
Type or Print Name	(Signature of Owner/Operator)		(Date)				



17115 Finnell Rd, Northport, AL 35475 Office (205)210-5096 Fax (205)210-5599

To Whom It May Concern,

MAK Environmental, LLC (MAK) is the asbestos abatement contractor that will remove the windows with asbestos containing caulk at the Highway Village, Meridian, MS. The aluminum windows have a mill finish and the brick veneer is unpainted. A lead test was performed at the same time as the asbestos survey and it was determined that there was no lead paint associated with the windows or window openings. MAK will take pictures before, during and after the abatement for record keeping purposes. Should you have any questions or need more information, do not hesitate to give me a call on my cell phone (205-310-8863).

Regards,

Aubry L McCarley

Member

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