

MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM (PI)

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 3/18/2025	AI Number
I. Type of Notification (O=Original R=Revised C=Canceled A= Annual): R= Revised Address / Added Samples			
II. TYPE OF OPERATION (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation): D= DEMO			
III. FACILITY DESCRIPTION (Include building name, number and floor or room number):			
Bldg. Name: The old Thornton Cotton Gin Scalehouse & Office Building			
Address: 33.07345, 790.32348 (GPS COORDINATES)			
City: Thornton	State: MS	Zip: 39169	
Site Location: Hwy 49E South Thornton, MS		Tel: 662-571-3653	
Building Size: 1,200 SF	# of Floors: 1	Age in Years: 50+	
Present Use: VACANT	Prior Use: SCALEHOUSE / OFFICE BUILDING		
IV. FACILITY INFORMATION (Identify owner, asbestos removal contractor, and other operator)			
OWNER NAME: William M. Thompson			
Address: 6 PROVENCE BOULEVARD			
City: MADISON	State: MS	Zip: 39110	
Contact: William M. Thompson	Tel: 662-571-3653		
ASBESTOS REMOVAL CONTRACTOR: BELL ENVIRONMENTAL SERVICES, LLC.			
Address: P.O. BOX 133			
City: DELTA City	State: MS	Zip: 39061	
Contact: Jimmy BELL	Tel: 662-820-2124		
Certification Number: ABC-00001282	Expiration Date: 1/15/25		
OTHER OPERATOR: William M. Thompson			
Address: 6 PROVENCE BOULEVARD			
City: MADISON	State: MS	Zip: 39110	
Contact: William M. Thompson	Tel: 662-571-3653		
V. WAS SITE INSPECTED TO DETERMINE PRESENCE OF ASBESTOS? (Yes/No): (YES) A Thorough Inspection			
WAS ASBESTOS PRESENT? (Yes/No): YES		Inspection Date: 3/6/25	
Inspector: PAUL ANDERSON	Certification Number: ABI-00001686	Expiration Date: 5/31/25	
VI. SUSPECT MATERIALS SAMPLED AND PROCEDURES USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL: SAMPLES WERE TAKEN FROM ROOFING MATERIALS LINOLEUM FLOORING, WINDOW CAULKING, T&I INSULATION, PAINT CEILING TILE, SIDING AND CEILING INSULATION, PROCESSES AND SHIPPED TO EUROPIUS CEZ LABS, AT 730 SE MAYNARD RD., CARY, NC 27511. A FULL INSPECTION WERE PERFORMED USING THE PLM METHOD. (RESULTS: TRANSITE SIDING AND THE LINOLEUM FLOORING CONTAINS ASBESTOS)			
VII. QUANTITY OF RACM TO BE REMOVED: 1100 SF Transite Siding, 680 SF Linoleum Flooring			
Pipes (LN FT): 0	Surface Area (SQ FT): 1,780 SF	Volume of Facility Components (CU FT): 0	
VIII. QUANTITY OF NONFRIABLE ASBESTOS NOT REMOVED: 0			
Category I: <input checked="" type="checkbox"/>		Category II:	
IX. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: 3/28/25		Complete: 3/29/25	
X. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: 3/30/25		Complete: 4/30/25	

XI. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:
 WET METHOD, REMOVE intact, Containment, Double BAG AND DOUBLE WRAP, 6 mil POLY

XII. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION OR RENOVATION SITE: CLEAR AREA Around Building. PLACE 6 mil POLY 4 FEET wide underneath Siding. WET REMOVE Siding From Building using ROOFING SHovel, PLACE ONTO 6 mil POLY ON THE ground, WRAP, BAG, TAG, TAPE. WET AND REMOVE LINOLEUM, BAG, TAG, TAPE. PLACE ALL ASBESTOS INTO A LINED Dumpster. Tarp, Transport To A STATE APPROVED LANDFILL.

XIII. WASTE TRANSPORTER #1

Name: BELL ENVIRONMENTAL SERVICES, LLC.

Address: P.O. BOX 133

City: Delta City State: ms Zip: 39061

Contact Person: Jimmy Bell Tel: 662 820 2124

WASTE TRANSPORTER #2 N/A

Name:

Address:

City: State: Zip:

Contact Person: Tel:

XIV. WASTE DISPOSAL SITE

Name: LEFLORE County Landfill

Address: 15200 Hwy 496 South

City: Sidon State: ms Zip: 38954

Contact Person: MABEL Brown Tel: 662 455-7760

XV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW: N/A

Name: Title:

Authority:

Date of Order (MM/DD/YY): Date Ordered to Begin (MM/DD/YY):

XVI. FOR EMERGENCY RENOVATIONS: N/A

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 CRUMBLED, PULVERIZED, OR REDUCED TO POWDER:

STOP WORK, CONTACT OWNER/MDEQ OF CHANGE. REVISE NOTIFICATION, FOLLOW MDEQ DIRECTION.

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.

Jimmy Bell (Type or Print Name) Jimmy Bell (Signature of Owner/Operator) 3/19/25 (Date)

XIX. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT:

Jimmy Bell (Type or Print Name) Jimmy Bell (Signature of Owner/Operator) 3/18/25 (Date)