

# 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) 01/16/2025 ABC received	Date Received 01/07/2025 & 01/09/2025	AI Number 81856
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):				
Bldg. Name: <b>Highway Village Bldg I</b>				
Address: <b>506 Front Street Extension</b>				
City: <b>Meridian</b>		State: <b>MS</b>	Zip: <b>39301</b>	
Site Location: <b>Building I Windows</b>			Tel: <b>601-693-4285</b>	
Building Size: <b>7500 sf</b>		# of Floors: <b>2</b>	Age in Years: <b>85 yrs</b>	
Present Use: <b>Multi Family Housing</b>		Prior Use: <b>Multi Family Housing</b>		
IV. FACILITY INFORMATION (Identify owner, asbestos removal contractor, and other operator)				
OWNER NAME: <b>Meridian Housing Authority</b>				
Address: <b>606 16th St</b>				
City: <b>Meridian</b>		State: <b>MS</b>	Zip: <b>39301</b>	
Contact: <b>Cade Mitchell</b>			Tel: <b>601-826-3964</b>	
ASBESTOS REMOVAL CONTRACTOR: <b>MAK Environmental, LLC</b>				
Address: <b>17115 Finnell Rd</b>				
City: <b>Northport</b>		State: <b>AL</b>	Zip: <b>35475</b>	
Contact: <b>Aubry L McCarley</b>			Tel: <b>205-310-8863</b>	
Certification Number: <b>ABC-00007308</b>			Expiration Date: <b>1-15-25 01/10/2026</b>	
OTHER OPERATOR: <b>None</b>				
Address: <b>NA</b>				
City:		State:	Zip:	
Contact:			Tel:	
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>6-24-24</b>	
Inspector: <b>Rosie Jackson</b>		Certification Number: <b>ABI-00011405</b>	Expiration Date: <b>4-23-25</b>	
VI. SUSPECT MATERIALS SAMPLED AND PROCEDURES USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL: Ceiling texture, Window/door caulk, flooring and mastic was tested using PLM method. Only the window caulk was positive for asbestos. LBP inspection Date 5-28-24, Inspector Rosie Jackson #LIN04233B1BF1F8 MAK LBP Firm #PBF-00000570 Exp 4-18-25 Aubry McCarley LBP Supervisor #PBS-00007598 Exp 4-18-25				
VII. QUANTITY OF RACM TO BE REMOVED: <b>Caulking on 58 windows (component removal)</b>				
Pipes (LN FT): <b>0</b>		Surface Area (SQ FT): <b>0</b>	Volume of Facility Components (CU FT): <b>2.5 cuft</b>	
VIII. QUANTITY OF NONFRIABLE ASBESTOS NOT REMOVED: <b>0</b>				
Category I: <b>0</b>			Category II: <b>0</b>	
IX. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: <b>2-7-25</b>			Complete: <b>2-8-25</b>	
X. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: <b>2-9-25</b>			Complete: <b>5-8-25</b>	

**XI. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:**  
New windows will be installed after old windows are removed and caulk is abated.

**XII. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION OR RENOVATION SITE:**  
Windows will be removed using wet method. Interior side of window opening will be sealed and ground will be covered with plastic sheeting to prevent cross contamination.

**XIII. WASTE TRANSPORTER #1**

Name: Burns Waste

Address: 24 Burns Dr

City: Columbus

State: MS

Zip: 39702

Contact Person: Raygan Gibson

Tel: 662-848-2484

**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: 662-361-0300

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

Name: NA

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:

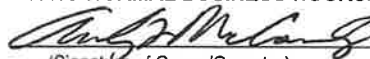
**XVII. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER:**

Keep wet and expand containment. Notify asbestos inspector 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

Type or Print Name

  
(Signature of Owner/Operator)

1-6-25

(Date)

**XIX. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT:**

Aubry L McCarley

Type or Print Name

  
(Signature of Owner/Operator)

1-6-25

(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,

A handwritten signature in black ink that reads 'Aubry L. McCarley'. The signature is written in a cursive style with a large, prominent 'A' and 'M'.

Aubry L McCarley  
Member

