

MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

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

	Aspestos and Lead Bran Istmark (mail only)	Dale Received Al Number 3/14/2025			
I. Type of Notification (O=Original R=Revised C=	Canceled A= Annual): R				
II. TYPE OF OPERATION (D=Demo O= Ordered		Renovation): D			
III. FACILITY DESCRIPTION (Include building nam					
Bldg, Name: Residential House					
Address: 3450 FONTAINE AVE					
City: JACKSON					
Site Location: Same as above		Tel;			
Building Size: 1,281	# of Floors: 1	Age in Years: 64			
Present Use: abandoned single family dwe		le family dwelling			
IV. FACILITY INFORMATION (Identify owner, asb					
OWNER NAME: GILBERT SHELIA					
Address 916-B EMINENCE RD					
City: JACKSON	State MS	Zip: 39213			
Contact: City of Jackson	0.00	Tel:601-960-1054 or 601-960-1066			
ASBESTOS REMOVAL CONTRACTOR:					
Address: N/A					
City:	Stale:	Zip:			
Centact:	contact: Tel:				
Certification Number:		Expiration Date:			
OTHER OPERATOR: FOUR SEASONS EN	TERPRISES, LLC				
Address: 5822 Canton Park Dr					
City JACKSON	State: MS	Z _{Ip} : 39211			
Contact: Robert Love					
V. WAS SITE INSPECTED TO DETERMINE PRES	SENCE OF ASBESTOS? (Yes	VNo): YES			
WAS ASBESTOS PRESENT? (Yes/No): NO		Inspection Date: 04/12/2024			
Inspector: Vincent McDonald	Certification Number: ABI-0	00011874 Expiration Date 10/25/2025			
VI. SUSPECT MATERIALS SAMPLED AND PRO					
EPA 600/R-93-/116 BULK POLAR ROOFING FELT, ROOFING SHIN					
AND CHANTED OF BACK TO BE SENOVED.					
VII. QUANTITY OF RACM TO BE REMOVED:					
Pipes (LN FT): N/A Su	face Area (SQ FT): N/A	Volume of Facility Components (CU FT): 1,680			
VIII. QUANTITY OF NONFRIABLE ASBESTOS N	OT REMOVED:				
Category I: N/A		Category II:			
IX. SCHEDULED DATES ASBESTOS REMOVAL	(MM/DD/YY) Start: N/A	Complete: N/A			
X. SCHEDULED DATES DEMO/RENOVATION (A	IM/DD/YY) Start: 4-8-202	5 Complete: 4-11-2025			

XII. DESCRIPTION OF WORK PRACTICES AND EN DEMOLITION OR RENOVATION SITE: Wet Method and remove intect	GINEERING CONTROLS TO	BE USED TO PREVENT EM	IISSIONS OF ASBESTOS AT THE
XIII. WASTE TRANSPORTER #1			
Name: Robert Love			77111
Address: 5822 Canton Park Dr.			
City: Jackson	State: Ms.	Zip: 39211	
Contact Person, Robert Love	Oldic.	Tet 601-331-2	2828
WASTE TRANSPORTER #2		1100	
Name: Robert E. Love			
Address: Same			37-
City:	State:	Zip:	
Contact Person:	1,5000	Tel:	
XIV. WASTE DISPOSAL SITE		101.	
_{Name:} Little Dixie			
Address: 1716 E. County Line Rd.			
City: Ridgeland	State: MS	Zip: 39157	
Contact Person: Samatha		Tel 601-982-9	1488
XV. IF DEMOLITION ORDERED BY A GOVERNMEN	IT AGENCY, PLEASE IDENT		
Name: SAMANTHA GRAVES		Title: MANAGER	
Authority; City of Jackson			
Date of Order (MM/DD/YY): 10/8/2024	Date	Ordered to Begin (MM/DD/YY	N/A
(VI. FOR EMERGENCY RENOVATIONS: N/A	1 67356	States to begin (miniber i i	Ji.
Date and Hour of Emergency (MM/DD/YY), N/A			
Description of the sudden unexpected event:			
N/A			
Explanation of how the event caused unsafe conditions	s or would cause equipment d	amage or an unreasonable fir	nancial burden:
IIO.			
(VII. DESCRIPTION OF PROCEDURES TO BE FOL	LOWED IN THE EVENT THA	T UNEXPECTED ASBESTO	S IS FOUND OR PREVIOUSLY
NONFRIABLE ASTESTOS MATERIAL BECOMES C	RUMBLED, PULVERIZED, O	R REDUCED TO POWDER:	
Contain & seal off, work area, we	et materials, utilize	negative air,chel	a filtered equipment a
necessary asbestos bags.			
(VIII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN DISITE DURING THE DEMOLITION OR RENOVATI THIS PERSON WILL BE AVAILABLE FOR INSPECT	ON, AND EVIDENCE THAT 1	HE REQUIRED TRAINING I	RT 61, SUBPART M) WILL BE HAS BEEN ACCOMPLISHED BY
Type or Print Name	(Signature of Owner/O	perator)	(Date)
(IX. I CERTIFY THAT THE ABOVE INFORMATION I	S CORRECT:		2
Robert Love	DIAR		3-14-2025
Nobelt 2046	- Kerling bro		3-14-2023



13201 Northwest Freeway, Suite 520 Houston, Texas 77040 phone 713-343-4017 | fax 713-934-9942 www.easlabs.com | facebook.com/easlabs | Info@easlabs.com

Test: EPA 600/R-93/116 **Polarized Light Microscopy**

Client Information:

City of Jackson

200 S President St Jackson, MS 39201

Phone: 601-960-1054

E-Mail: mcdonaldv@clty.jackson.ms.us

Project:

Date Analyzed: 04/24/2024 11:14 AM

3450 Fontaine Ave.

Date Received: 04/18/2024 09:20 AM

CF-22-159

EAS Job: 24041820

TAT Requested: 3 Days

Vincent

Attn: McDonald Microscope: Olympus-CH-40

Sample # Lab ID #	Layer	Sample Description	Asbestos Detected (Yes/No)	Asbestos Mineral Percent	Non-Asbestos Fibers	Non-Fibrous Material
1 24041820.01	Α	Black Fibrous/Tar Felt Paper Non-Homogeneous	NO	None Detected	Cellulose 60%	Adhesive 40%
2 24041820.02	Α	Black/Gray Fibrous/Granular/Tar Roofing Shingle Homogeneous	NO	None Detected	Cellulose 20% Fiberglass 20%	Asphaltic Matrix 60%
3 24041820.03	A	Gray Granular Brick Mortar Homogeneous	NO	None Detected		Sand / Aggregate 80% Binders 209

NVLAP Lab Code: 200784-0 TDSHS License No. 300373 LDEQ LELAP Certificate No: 04161, Agency Interest No. 149571

Note:

Some samples (thorn tiles, surfacing, etc.) may contain fibers too small to be detectable by PUA. TIM Chalifield analysis of bulk material is recommended in this case. All abbestos percentages are based on calibrated visual information transport of acceptable percentages, depending on the actual occumentation of asbestos. Public at any agency of the report may not be reported visual information of asbestos. This report may not be reported visual information of asbestos to the report may not be reproduced except in full without permissions from Environmental Analysis of Services.

These results are submitted pursuant to EAS current terms of sale, including the company's standard warranty and ill milation of liability provisions and no response to the part of the manner in which the results are used or interpreted. Unless notified in writing to return the samples covered by this report, EAS will store the samples for a period of metry (RO) days before distantling. Percent ranges reported are estimates and not absolute percent range values.

Analyzed By: (

Clint Mathews

Approved Signatory:

Clint Mathews

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Tenvironmental
Analytical
Services, LLC

13201 Northwest Freeway, Suite 520 Houston, Texas 77040 (713) 343-4017 Fax (713) 934-9942 www.easlabs.com, arthur@easlabs.com facebook.com/easlabs

* Job ID 24041820

CHAIN OF CUSTODY



		Bulk Sample Data		City of Jackson	
Client Name / Address: CITY OF JACKSON 200 S PRESIDENT ST JACKSON, MS 39201 Quantity / Analysis Requested:		Project Name: 3450 Fontaine Ave Project Number: CE-22-154		EAS Use Only	
				EAS PO Number, (FappStation)	
1		r 24 Hour 5 Day (Routine) [y)	
intact: Vincent 1			Phone: 601-960-		
mail: medonalily	Enty: Jackson	ins.16			
pecial Instructions:					
#	Location		(or s	Sample Description (or see attached description)	
	Roof	7 %	Ţ.	elt	
2	Roofin	ĵ	Sh	ingle	
3	Exterior		Ba	ck Montar	
	STRUCTURE APP	ROXIMATELY: 60 L 7	25		
Relinquished By: Chip Date/Time: 4/-/2-	style likes	Accepted Date/Time	Ca	1-18-24 2920	
Rev 10/12		Like us on facebook		Page of	