

# MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

Mail notification to: MDEQ Asbestos Section, 515 E. Amite Street, Jackson, MS 39201

Operator Project #	Postmark 6/29/21	Date Received (MDEQ use only) 7/1/21	Notification # (MDEQ use only)		
Type of Notification (O=Original <input checked="" type="radio"/> Revised C=Canceled A=Annual) <input checked="" type="radio"/>					
I. TYPE OF OPERATION (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation) <b>R</b>					
II. FACILITY DESCRIPTION (include building name, number and floor or room number)					
Bldg. Name: <b>GW. Carver Elementary School</b>					
Address: <b>381 Willegmburg rd</b>					
City: <b>Bassfield</b>	State: <b>MS</b>	Zip: <b>39421</b>			
Site Location:		Tel:			
Building Size: <b>17,000</b>	# of Floors: <b>1</b>	Age in Years:			
Present Use:		Prior Use:			
V. FACILITY INFORMATION (Identify owner, removal contractor, and other operator)					
OWNER NAME: <b>Jay Van Company</b>					
Address: <b>P.O. Box 15427</b>					
City: <b>Hattiesburg</b>	State: <b>MS</b>	Zip: <b>39404</b>			
Contact: <b>Matt Shelby</b>	Tel: <b>601-297-4857</b>				
REMOVAL CONTRACTOR: <b>Frederick Environmental LLC</b>					
Address: <b>111 Townsend St</b>					
City: <b>Hattiesburg</b>	State: <b>MS</b>	Zip: <b>39401</b>			
Contact: <b>Frederick Smith</b>	Tel: <b>601-918-2568</b>				
OTHER OPERATOR:					
Address:					
City:	State:	Zip:			
Contact:					
VI. IS ASBESTOS PRESENT? (Yes/No) <b>Yes Floor tile &amp; Black mastic</b>					
VII. PROCEDURE, INCLUDING ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL (Include inspector name and date of inspection):					
<b>Alfred Martin Environmental Management Plus Inc</b>					
VIII. APPROXIMATE AMOUNT OF ASBESTOS INCLUDING:					
1. Regulated ACM to be Removed 2. Category I ACM Not Removed 3. Category II ACM Not Removed	RACM To Be Removed	Nonfriable Asbestos Material Not To Be Removed		Indicate Unit of Measurement Below	
		Category I	Category II	UNIT	
Pipes	None	None	None	Ln Ft:	Ln M:
Surface Area	17,000	17,000		Sq Ft:	Sq M:
/ol RACM Off Facility Component:			Cu Ft:	Cu M:	
IX. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: <b>6-7-13-2021</b> Complete: <b>7-30-2021</b>					
X. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: Complete:					

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DEQ OPC

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:

Safe Handling is the main goal

XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION OR RENOVATION SITE:

Keep every thing wet at all Time

XII. WASTE TRANSPORTER #1

Frederick Environmental LLC

Name

Frederick Smith

Address:

116 Townsend St

City:

Hattiesburg

State:

MS

Zip:

39401

Contact Person

Tel:

601-918-2568

WASTE TRANSPORTER #2

Name

Address:

City:

State:

Zip:

Contact Person:

Tel:

XIII. WASTE DISPOSAL SITE

Pine Belt Regional Land Fill

Name:

Pine Belt Reg. SWMA

Address:

P.O. Box 389

City:

P.O. Box 381 - Patai

State:

MS

Zip:

39465

Tel:

601-545-6676

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

Name:

Title:

Authority:

Date of Order (MM/DD/YY):

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

XV. 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.

Stop work call DEQ

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

Stop work call DEQ

XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR PART 61, SUBPART M) WILL BE ON-SITE 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

Frederick Smith

(Signature of Owner/Operator)

6-29-2021

(Date)

XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT:

Frederick Smith

(Signature of Owner/Operator)

6-29-2021

(Date)