

"REV"

**MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM**

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

Operator Project #	Postmark 7/22/2021	Date Received (MDEQ use only) 07/26/2021	Notification # (MDEQ use only)		
I. Type of Notification (O=Original R=Revised C=Canceled A= Annual) <b>R= REVISAL Inspection, start DATE</b>					
II. TYPE OF OPERATION (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation) <b>D= DEMO</b>					
III. FACILITY DESCRIPTION (Include building name, number and floor or room number)					
Bldg. Name: <b>ARNIE JOHNSON Dutch Oil Group</b>					
Address <b>2003 COMMERCE STREET</b>					
City: <b>GRENADE</b>	State: <b>MS</b>	Zip: <b>38901</b>			
Site Location: <b>2003 Commerce Street</b>		Tel: <b>662-574-9196</b>			
Building Size <b>3,100 sq ft</b>	# of Floors: <b>1</b>	Age in Years: <b>35+-</b>			
Present Use: <b>VACANT</b>	Prior Use: <b>OFFICE SPACE</b>				
IV. FACILITY INFORMATION (Identify owner, removal contractor, and other operator)					
OWNER NAME: <b>The Dutch Oil Group</b>					
Address: <b>1505 SUNSET DRIVE</b>					
City: <b>GRENADE</b>	State: <b>MS</b>	Zip: <b>38901</b>			
Contact: <b>DENVER BOWERS</b>	Tel: <b>662-574-9196</b>				
REMOVAL CONTRACTOR <b>BELL ENVIRONMENTAL SERVICES, LLC</b>					
Address: <b>P.O. BOX 133</b>					
City: <b>DELTA City</b>	State: <b>MS</b>	Zip: <b>39061</b>			
Contact: <b>JIMMY BELL</b>	Tel: <b>662-574-9196</b>				
OTHER OPERATOR: <b>The Dutch Oil Group</b>					
Address: <b>1505 SUNSET DRIVE</b>					
City: <b>GRENADE</b>	State: <b>MS</b>	Zip: <b>38901</b>			
Contact: <b>DENVER BOWERS</b>					
V. IS ASBESTOS PRESENT? (Yes/No) <b>(YES) Asbestos Containing Floor Tile/Mastic, Roof Flashing</b>					
VI. PROCEDURE, INCLUDING ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL (Include inspector name and date of inspection): <b>Inspected by PAUL ANDERSON LIC.# ABZ-00061686 using the PLM ANALYTICAL METHOD by THE GHS LAB., 7469 WHITEPINE, Rd., RICHMOND, VA 23237.</b>					
VII. 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	<b>Root Flashing</b>		<input checked="" type="checkbox"/>	Ln Ft: <b>272</b>	Ln M:
Surface Area <b>1</b>	<b>Floor tile mastic</b>		<input checked="" type="checkbox"/>	Sq Ft: <b>2,900</b>	Sq M:
Vol RACM Off Facility Component				Cu Ft:	Cu M:
VIII. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: <b>8/2/2021</b>				Complete: <b>8/12/2021</b>	
IX. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: <b>8/12/2021</b>				Complete: <b>12/12/2021</b>	

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

Wet Method, NEG-Air Units, D-con unit Floor Tile/Mastic Under Containment

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

KEEP WET, REMOVE MOSTLY INTACT, DOUBLE BAG, SEAL-TAPE TAG, LOAD INTO LINED DUMPSTER, CLEAN UP, AWAIT INSPECTION, CLEARANCE. REMOVE MATERIAL FROM ROOF USING SKY LIFT WITH DUMP BOX

XII. WASTE TRANSPORTER #1

Name: BALL 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:

XIII. WASTE DISPOSAL SITE

Name: LATAHOC COUNTY LANDFILL

Address: 15200 U.S. HWY 49E SOUTH

City: SIDON

State: MS

Zip: 38954

Tel: 662-455-6477

XIV. 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):

XV. 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:

XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLING, PULVERIZED, OR REDUCED TO POWDER: STOP WORK, WET WORK WORK AREA. CONTACT OWNER AND MDEQ OF CHANGE. AWAIT MDEQ DIRECTIONS

XVII. 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

7/21/2021  
(Date)

XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.

JIMMY BELL  
Type or Print Name

*Jimmy Bell*  
Signature of Owner/Operator

7/21/2021  
(Date)