

# MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

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

Operator Project #	Postmark <u>emailed</u> <del>8/16/21</del>	Date Received (MDEQ use only) <u>8/16/21</u>	Notification # (MDEQ use only) <u>79968</u>	
I. Type of Notification (O=Original R=Revised C=Cancelled A=Annual) <u>DEMISO 8/16/21</u>				
II. TYPE OF OPERATION (D=Demo O=Ordered Demo R=Renovation E=Emer. Renovation)				
III. FACILITY DESCRIPTION (Include building name, number and floor or room number)				
Bldg. Name: <u>COLEMAN BAR-B-Q</u>				
Address: <u>551 E. COMMERCE STREET</u>				
City: <u>HERNANDO</u>	State: <u>MS</u>	Zip: <u>38632</u>	Tel: <u>(662) 249-9196</u>	
Site Location:				
Building Size: <u>1,720 SF</u>	# of Floors: <u>1</u>	Age in Years: <u>50</u>		
Present Use: <u>VACANT</u>	Prior Use: <u>RESTAURANT</u>			
IV. FACILITY INFORMATION (Identify owner, removal contractor, and other operator)				
OWNER NAME: <u>TRUSTMARK NATIONAL BANK</u>				
Address: <u>248 E. CAPITOL STREET SUITE 517</u>				
City: <u>JACKSON</u>	State: <u>MS</u>	Zip: <u>39201</u>	Tel: <u>(601) 208-2536</u>	
Contact: <u>BARRY COLLIER</u>				
REMOVAL CONTRACTOR: <u>SPECIALTY ABATEMENT SERVICES, INC.</u>				
Address: <u>4009 BROADWAY</u>				
City: <u>BARTLETT</u>	State: <u>TN</u>	Zip: <u>38135</u>	Tel: <u>(901) 507-1203</u>	
Contact: <u>DWIGHT GRAYSON</u>				
OTHER OPERATOR: <u>MIKE ROZIER CONSTRUCTION Co.</u>				
Address: <u>1047A HWY. B2 EAST</u>				
City: <u>GREENWOOD</u>	State: <u>MS</u>	Zip: <u>38930</u>	Tel: <u>(662) 453-8161</u>	
Contact: <u>TAYLOR THACH</u>				
V. IS ASBESTOS PRESENT? <input checked="" type="checkbox"/> (Yes) <input type="checkbox"/> (No)				
VI. PROCEDURE, INCLUDING ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL (Include inspector name and date of inspection): <u>BULK SAMPLES BY MS. ACCREDITED ASBESTOS BUILDING INSPECTORS &amp; PLM ANALYSIS OF BULK SAMPLES REPORT ATTACHED</u>				
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  UNIT
		Category I	Category II	
<u>Asbestos CAULKING</u>	<u>150325</u>			<u>LNFT</u> <u>SQT</u> Cu Ft:      Cu M:
<u>FLOOR TILE + MORTAR</u>	<u>1460 SQ. FT.</u>			<u>1660 SQ. FT.</u>
<u>BUILT-UP ROOF + FLOOR</u>				
VIII. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: <u>08/03/21</u> <u>08/25/21</u> Complete: <u>08/17/21</u> <u>08/30/21</u>				
IX. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: <u>09/07/21</u> Complete: <u>09/21/21</u>				

RECEIVED  
AUG 16 RECD  
 DEQ OPC

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED: **ABATEMENT USE PROTECTIVE PARASTIC (1440 SF), CADMIUM ON STREETFRONT (225 LF) AND BUILT-UP ROOFING FLASHING (1660 SF)**

XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION OR RENOVATION SITE: **INTERIOR WORK AREA WILL BE ISOLATED & PLACED UNDER NEGATIVE PRESSURE WITH HEPA FILTERED EXHAUST PANS. EXTERIOR WORK AREAS WILL BE ISOLATED W/ BARRIER TAPE TO PREVENT WIND-DRIVEN PARTICLES. AREA WILL BE DEMONSTRATED UTILIZING WAND TOOLS & WET METHODS. FLOOR, WALLS & CEILING WILL BE ABATED. ROOFING/FLASHING WILL BE PROVED IN EACH PHASE. DEBRIS & BULKY ITEMS WILL BE WRAPPED. ALL WASTE WILL BE DISPOSED IN AN AUTHORIZED LANDFILL.**

XII. WASTE TRANSPORTER #1  
Name: **Tunica Landfill - Waste Mgmt Management**  
Address: **3065 Bowdre Rd**  
City: **Robinsonville** State: **MS** Zip: **38664**  
Contact Person: Tel: **(662) 363-2282**

WASTE TRANSPORTER #2  
Name: **DEMPSEY CONSTRUCTION COMPANY, LLC**  
Address: **4207 CHASE RICHIE TRAIL**  
City: **OLIVE BRANCH** State: **MS** Zip: **38654**  
Contact Person: **SCOOTER DEMPSEY** Tel: **(901) 494-6932**

XIII. WASTE DISPOSAL SITE  
Name: **Tunica Landfill (Asbestos) Starlandway Rubbish Pit (BLDG DEBRIS)**  
Address: **3065 Bowdre Rd. (Asbestos) 9353 Starlandway Rd. (Bldg debris)**  
City: **Robinsonville / Lake Cormorant** State: **MS** Zip: **38664 / 38641**  
Tel: **(662) 363-2282 (Tunica Landfill) (662) 895-9705 (Starlandway)**

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:

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. ISOLATE WORK AREA UTILIZING WET METHODS & HEPA VACUUMS TO CLEAN AREA. NOTIFY MDEQ & GEORGE PARSON/FISHER AGENCY OF EVENT & TO DETERMINE ADDITIONAL ACTIONS.**

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.

**George R. Parson, Jr.** (Type or Print Name) **George R. Parson, Jr.** (Signature of Owner/Operator) **20 July 2021** (Date)  
**George R. Parson, Jr.** (Type or Print Name) **George R. Parson, Jr.** (Signature of Owner/Operator) **20 July 2021** (Date)