

# 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)	Date Received 4.22.2022	AI Number 5099
<b>I. Type of Notification</b> (O=Original R=Revised C=Canceled A= Annual): O - original				
<b>II. TYPE OF OPERATION</b> (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation): E - Emer. Renovation				
<b>III. FACILITY DESCRIPTION</b> (Include building name, number and floor or room number):				
Bldg. Name: Cooperative Energy - Powerhouse				
Address: 308 Moselle Seminary Road				
City: Moselle		State: MS	Zip: 39459	
Site Location: Unit # Boiler Feed Pump A/B			Tel: 601-705-2913	
Building Size: 50,000 sq ft +		# of Floors: 4	Age in Years: 50+	
Present Use: Power Generation		Prior Use: Power Generation		
<b>IV. FACILITY INFORMATION</b> (Identify owner, asbestos removal contractor, and other operator)				
OWNER NAME: SAME				
Address: same				
City: same		State: same	Zip: same	
Contact: Alex Howard			Tel: 601-705-2913	
ASBESTOS REMOVAL CONTRACTOR: Industrial Asbestos Removal, LLC				
Address: 11637 Sunbelt Court				
City: Baton Rouge		State: LA	Zip: 70809	
Contact: Joseph Lambert			Tel: 225-752-2194	
Certification Number: ABC-00009701			Expiration Date: 12/03/2022	
OTHER OPERATOR: NA				
Address: NA				
City: NA		State: NA	Zip: NA	
Contact: NA			Tel: NA	
<b>V. WAS SITE INSPECTED TO DETERMINE PRESENCE OF ASBESTOS?</b> (Yes/No): Yes				
WAS ASBESTOS PRESENT? (Yes/No): Yes			Inspection Date: 10-1-2020	
Inspector: Pace Analytical - Branley Dearman		Certification Number:	Expiration Date:	
<b>VI. SUSPECT MATERIALS SAMPLED AND PROCEDURES USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL:</b>				
Asbestos bulk PLM EPA 600/R-93/116				
<b>VII. QUANTITY OF RACM TO BE REMOVED:</b>				
Pipes (LN FT): 16' l/f		Surface Area (SQ FT):	Volume of Facility Components (CU FT):	
<b>VIII. QUANTITY OF NONFRIABLE ASBESTOS NOT REMOVED:</b>				
Category I: NA		Category II: NA		
<b>IX. SCHEDULED DATES ASBESTOS REMOVAL</b> (MM/DD/YY) Start: 04/23/2022			Complete: 04/23/2022	
<b>X. SCHEDULED DATES DEMO/RENOVATION</b> (MM/DD/YY) Start: NA			Complete: NA	

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

Erect neg. pressure enclosure & glove bagging

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

Erect neg pressure enclosure and glove bagging; utilize water, HEPA vacuum and double bag all waste

**XIII. WASTE TRANSPORTER #1**

Name: Republic Services

Address: 1035 Old Branch Road

City: Flowood

State: MS

Zip: 39232

Contact Person: Michael Raley

Tel: 601-420-8243

**WASTE TRANSPORTER #2 same**

Name: same

Address: same

City: same

State: same

Zip: same

Contact Person: same

Tel: same

**XIV. WASTE DISPOSAL SITE**

Name: Pine Belt Regional Solid Waste Management Authority

Address: 5274 Hwy 29 S

City: Overt

State: MS

Zip: 39464

Contact Person: Tony Harrison

Tel: 601-545-6676

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

Name: NA

Title: NA

Authority: NA

Date of Order (MM/DD/YY): NA

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

**XVI. FOR EMERGENCY RENOVATIONS:**

Date and Hour of Emergency (MM/DD/YY): 04/20/2022 0700

Description of the sudden unexpected event:

Leak in boiler feed pump discharge line; unit offline for repair; need insulation removed for repair

Explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden:

Unit can not operate until leak is repaired.

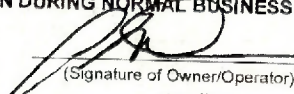
**XVII. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLLED, PULVERIZED, OR REDUCED TO POWDER:**

Stop work; clean area and notify MDEQ

**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.**

Alex Howard

Type or Print Name

  
(Signature of Owner/Operator)

4/22/2022

(Date)

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

Alex Howard

Type or Print Name

  
(Signature of Owner/Operator)

4/22/2022

(Date)