"Rev"

MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

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

Mail notification to: MDEQ Aspestos	And Lead Di anten,	Date-Received 222 Al Number	
MDEQ Use Only: Postmark (mi	ail only)	Date Received . 7072 At Number	
I. Type of Notification (O=Onginal R=Revised C=Canceled A			
II. TYPE OF OPERATION (D=Demo O= Ordered Demo R=R		rovation):R	
HI. FACILITY DESCRIPTION (Include building name, number			
Bidg. Name:			
Address: 4840 Main Street			
City: Flora	State: ms	zip:39071	
Site Location: downtown flora		Tel: 601-664-8858	
Building Size: 5000 sq ft	# of Floors: 1	Age in Years: 50+	
Present Use: Vacant	Prior Use: store front		
IV. FACILITY INFORMATION (Identify owner, sabeatos remo	oval contractor, and other	er operator)	
OWNER NAME: Jason Dean Charle	s Blak	ely	
Address: PO Box 100			
city: Flora	State: MS	zip: 39071	
contact: Jason Dean		Tel: 601-664-8858	
ASBESTOS REMOVAL CONTRACTOR: PEARSON ENV	ironmental		
Address: 130 southpointe dr. ste. J			
_{City:} byram	State: ms	zip: 39272	
Contact: Chris pearson		Tel: 601-9371186	
Certification Number: ABC-00005297		Expiration Date: 1/25/23	
OTHER OPERATOR:			
Address:			
City:	State:	Zip:	
Contact:		Tel:	
V. WAS SITE INSPECTED TO DETERMINE PRESENCE OF	F ASBESTOS7 (Yes/No	y: Yes	
WAS ASBESTOS PRESENT? (Yes/No): 465		Inspection Date: Sept 8, 2022	
Inspector: Chris Pearson Certificat	Ion Number: ABI-	00002023 Expiration Date: 1/6/23	
THE GOOD COT MATERIALS SAMPLED AND PROCEDURE	OGED TO DETECT !	HE PRESENCE OF ASBESTOS MATERIAL.	
Visual - 9x9 Floor			
Assumed to	be as be	stos	
VII. QUANTITY OF RACM TO BE REMOVED:	100 p 40 s		
Pipes (LN FT): Surface Area	(SQ FT): 5000	Volume of Facility Components (CU FT):	
VIII. QUANTITY OF NONFRIABLE ASSESTOS NOT REMO			
Category I: 5000	C/ Cet	agory II:	
IX. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/			
X. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: 40/7/22 /	0/8/22 Complete: 11/8/22	

DEMOLITION OR RENOVATION SITE: containment;HEPA air scrubber	s-negative pressure; debri	is bagged/sealed	
KIII. WASTE TRANSPORTER #1			
Name: pearson environmental			
Address: 130 southpointe dr ste. j			
City: byram	State: ms	Zip: 39272	
Contact Person: chris pearson		Tel: 6019371186	
WASTE TRANSPORTER #2	457		
Name:			
Address:			
City:	State:	Zip:	
Contact Person:		Tel:	
XIV. WASTE DISPOSAL SITE			
Name: little dixie landfill			
Address: 1716 N. County line rd			
City: ridgeland	State: ms	Zip: 39157	
Contact Person: mike raley	- They was to be a first of the same	Tel: (601) 982-94	88
XV. IF DEMOLITION ORDERED BY A GOVE	RNMENT AGENCY, PLEASE IDENT	IFY THE AGENCY BELOW:	
Name:		Title:	
Authority:		- A - X - X - X - X - X - X - X - X - X	
Date of Order (MM/DD/YY):	Date (
XVI. 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 d	lamage or an unressonable financi	al burden:
10 miles		charte de la Contraction	
XVII. DESCRIPTION OF PROCEDURES TO NONFRIABLE ASTESTOS MATERIAL BEC			FOUND OR PREVIOUSLY
work will stop; amended water			
XVIII. I CERTIFY THAT AN INDIVIDUAL TR ONSITE DURING THE DEMOLITION OR RI THIS PERSON WILL BE AVAILABLE FOR	ENOVATION, AND EVIDENCE THAT	THE REQUIRED TRAINING HAS	1, SUBPART M) WILL BE BEEN ACCOMPLISHED S
chris pearson	/ · m		9/22/22 9/26/ (Date) CP
Cimio polición			