

**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 07-05-2023	AI Number
I. Type of Notification (O=Original R=Revised C=Canceled A= Annual): <b>R</b>				
II. TYPE OF OPERATION (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation): <b>D</b>				
III. FACILITY DESCRIPTION (Include building name, number and floor or room number):				
Bldg. Name: <b>Gymnasium</b>				
Address: <b>1349 West Jackson Street</b>				
City: <b>Tupelo</b>		State: <b>MS</b>	Zip: <b>38801</b>	
Site Location: <b>1349 West Jackson, Street</b>			Tel: <b>662-321-8432</b>	
Building Size: <b>Appx 12,000 SQ FT</b>		# of Floors: <b>1</b>	Age in Years: <b>50+</b>	
Present Use: <b>Vacant</b>		Prior Use: <b>Gymnasium</b>		
IV. FACILITY INFORMATION (Identify owner, asbestos removal contractor, and other operator)				
OWNER NAME: <b>West Jackson Street Baptist Church</b>				
Address: <b>1349 West Jackson Street</b>				
City: <b>Tupelo</b>		State: <b>MS</b>	Zip: <b>38801</b>	
Contact: <b>Dr. Keith Cochran</b>			Tel: <b>662-321-8432</b>	
ASBESTOS REMOVAL CONTRACTOR: <b>Edward Clay - EAC Environmental</b>				
Address: <b>4546 Cal-Steens Road</b>				
City: <b>Caledonia</b>		State: <b>MS</b>	Zip: <b>39740</b>	
Contact: <b>Edward Clay</b>			Tel: <b>662-386-6386</b>	
Certification Number: <b>ABC-00005192</b>			Expiration Date: <b>11-05-2023</b>	
OTHER OPERATOR: <b>D&amp;D Trucking</b>				
Address: <b>256 Turner Park Drive</b>				
City: <b>Saltillo</b>		State: <b>MS</b>	Zip: <b>38866</b>	
Contact: <b>Matthew Duffy</b>			Tel: <b>662-891-9075</b>	
V. WAS SITE INSPECTED TO DETERMINE PRESENCE OF ASBESTOS? (Yes/No): <b>Yes</b>				
WAS ASBESTOS PRESENT? (Yes/No): <b>Yes</b>			Inspection Date: <b>01/03/2023</b>	
Inspector: <b>Willie Nester</b>		Certification Number: <b>ABI-00002244</b>	Expiration Date: <b>01/19/23</b>	
VI. SUSPECT MATERIALS SAMPLED AND PROCEDURES USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL: <b>Drywall, Ceiling Tile, Mastic, Floor Tile, Cove Base, Ext HVAC and Window Caulk Analyzation by PLM Method</b>				
VII. QUANTITY OF RACM TO BE REMOVED:				
Pipes (LN FT):		Surface Area (SQ FT): <b>Appx 6,000</b>	Volume of Facility Components (CU FT):	
VIII. QUANTITY OF NONFRIABLE ASBESTOS NOT REMOVED:				
Category I:			Category II:	
IX. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: <b>07-14-2023</b>			Complete: <b>07-17-2023</b>	
X. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: <b>07-18-23</b>			Complete: <b>08-11-23</b>	

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

Remove floor tile, mastic, HVAC and Window Caulk wet method, Demo with heavy equipment

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

Contain work area, use air scrubber, airless sprayer with surfactant, wet method removal, double bag, 6 mil poly

**XIII. WASTE TRANSPORTER #1**

Name: EAC Environmental

Address: 4546 Cal-Steens Road

City: Caledonia

State: MS

Zip: 39740

Contact Person: Edward Clay

Tel: 662-386-6386

**WASTE TRANSPORTER #2**

Name: Waste Pro

Address: 1600 12th Street South

City: Columbus

State: MS

Zip: 39701

Contact Person: RuthAnn Faris

Tel: 662-328-5528

**XIV. WASTE DISPOSAL SITE RoBo Landfill**

Name: RoBo Landfill

Address: 6447 Wahalak Road

City: Scooba

State: MS

Zip: 39358

Contact Person: Roland Edmonds

Tel: 662-798-4795

**XV. 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):

**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 damage or an unreasonable financial burden:

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

Contain material, notify owner's contact and 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.**

Edward A. Clay

Type or Print Name

*Edward A. Clay*  
(Signature of Owner/Operator)

07-05-23

(Date)

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

Edward A. Clay

Type or Print Name

*Edward A. Clay*  
(Signature of Owner/Operator)

07-05-23

(Date)