

MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

MAP PI

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

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|---|--|---|-----------------------------|--------------------|
| MDEQ Use Only: <input checked="" type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery | | Postmark (mail only) | Date Received 07-12-2023 | AI Number 70371 |
| I. Type of Notification (O=Original R=Revised C=Canceled A= Annual): O = ORIGINAL | | | | |
| II. TYPE OF OPERATION (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation): R = RENOVATION | | | | |
| III. FACILITY DESCRIPTION (Include building name, number and floor or room number): | | | | |
| Bldg. Name: South CANAL Subdivision (Single Family Residents) | | | | |
| Address: 1706 Forbes street | | | | |
| City: Tupelo | State: ms | Zip: 38801 | | |
| Site Location: 1706 Forbes street, Tupelo, MS | | Tel: 662-416-3418 | | |
| Building Size: 600 sq ft up stairs | # of Floors: 2 | Age in Years: 40+ | | |
| Present Use: VACANT FOR REPAIRS | Prior Use: 2 bedroom single family dwelling | | | |
| IV. FACILITY INFORMATION (Identify owner, asbestos removal contractor, and other operator) | | | | |
| OWNER NAME: Tupelo Housing Authority | | | | |
| Address: 701 South CANAL street | | | | |
| City: Tupelo | State: ms | Zip: 38801 | | |
| Contact: Tabitha Smith | Tel: 662-842-5122-ext. 2002 | | | |
| ASBESTOS REMOVAL CONTRACTOR: Bell Environmental Services, LLC. | | | | |
| Address: P.O. BOX 133 | | | | |
| City: Delta City | State: MS | Zip: 39061 | | |
| Contact: Jimmy Bell | Tel: 662-820-2124 | | | |
| Certification Number: ABC-00001282 | Expiration Date: 1/5/2024 | | | |
| OTHER OPERATOR: PACE & SONS CONSTRUCTION, INC. | | | | |
| Address: 374 CV-7000 | | | | |
| City: BOONEVILLE | State: ms | Zip: 38829 | | |
| Contact: CLAYTON PACE | Tel: 662-416-3418 | | | |
| V. WAS SITE INSPECTED TO DETERMINE PRESENCE OF ASBESTOS? (Yes/No): YES | | | | |
| WAS ASBESTOS PRESENT? (Yes/No): YES | | Inspection Date: Aug. 19, 2011 | | |
| Inspector: WILLIAM J. YOUNG | Certification Number: ABI-00001688 | Expiration Date: 9/24/2011 | | |
| VI. SUSPECT MATERIALS SAMPLED AND PROCEDURES USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL: SAMPLES TAKEN FROM: SHEETROCK WALLS, CEILING, INSULATION, ROOF MATERIALS, KITCHEN SINK BOTTOM, WINDOW MATERIALS. SHIPPED TO CA LABS, INC., BATON ROUGE, LA. MATERIALS TESTED USING THE PLM METHOD. | | | | |
| FLOOR TILE/MASTIC CONTAINS ASBESTOS | | | | |
| VII. QUANTITY OF RACM TO BE REMOVED: SECOND FLOOR - FLOOR TILE/MASTIC (NONFRIABLE) 600 sq ft | | | | |
| Pipes (LN FT): 0 | Surface Area (SQ FT): 600 sq ft | Volume of Facility Components (CU FT): 0 | | |
| VIII. QUANTITY OF NONFRIABLE ASBESTOS NOT REMOVED: 0 | | | | |
| Category I: <input checked="" type="checkbox"/> | Category II: <input type="checkbox"/> | | | |
| IX. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: 7/26/23 | | Complete: 7/28/23 | | |
| X. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: 7/29/23 | | Complete: 9/29/23 | | |

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XI. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:
WET METHOD, CONTAINMENT, NEG-AIR, D-EQ UNIT, INDEPENDENT AIR MONITORING/AIR -
CLEARANCE, DOUBLE BAG.

XII. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE
DEMOLITION OR RENOVATION SITE: PREP SITE, SIGNS, 6 MIL POLY OVER WINDOWS AND DOORS, AIR
VENTS. WET REMOVE. DOUBLE BAG, DROP TAG, TAPE CLOSE. REMOVE MASTIC, SOLIDIZE, DOUBLE BAG.
PLACE ALL BAGS INTO LINED TRAILER DUMP WITH TARP. HEPA-VAC, CLEAN, AWAIT AIR CLEARANCE.

XIII. WASTE TRANSPORTER #1

Name: BELL 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:

XIV. WASTE DISPOSAL SITE

Name: THREE RIVER LANDFILL

Address: 1904 PONTOTOC PARKWAY WEST

City: PONTOTOC

State: MS

Zip: 38863

Contact Person: 662 488 - 0444

Tel: 662 488 - 0444

XV. 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):

XVI. 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:

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

STOP WORK, CONTINUE NEG-AIR, CONTAINMENT, CONTACT OWNER/MDEQ OF CHANGE,
SEND MDEQ REVISED NOTIFICATION.

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.

Jimmy Bell

Type or Print Name

Jimmy Bell

(Signature of Owner/Operator)

7/13/23

(Date)

XIX. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT:

Jimmy Bell

Type or Print Name

Jimmy Bell

(Signature of Owner/Operator)

7/13/23

(Date)