MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

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

MDEQ Use Only:	Postmark (mail only)		Date Received 07-13-2023		Al Number 81569				
I. Type of Notification (O=Original R=Revised C=Canceled A= Annual): O									
II. TYPE OF OPERATION (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation): R									
III. FACILITY DESCRIPTION (Include building name, number and floor or room number): COLONIAL PIPELINE COMPANY									
Bldg. Name: CPC ROW NEAR MILE MARKER 351.4 ON LINE 2									
Address: CPC ROW CROSSING OF RANCH ROAD									
City: FOXWORTH		State: MS	67	z _{ip:} 39483					
Site Location: N/A		r-		Tel: N/A					
Building Size: N/A		# of Floors: N/A		Age in Years: N/A					
Present Use: N/A		Prior Use: N/A		4.91					
IV. FACILITY INFORMATION (Identify owner, asbestos removal contractor, and other operator)									
OWNER NAME: COLONIAL PIPELINE COMPANY									
Address: PO BOX 1298									
City: COLLINS		State: MS		_{Zip:} 39428					
Contact: PHILIP HUX				_{Tel:} 601-765-9180					
ASBESTOS REMOVAL CONTRACTOR: DDS									
Address: 87 PICKERING ROAD									
City: COLLINS		State: MS		zip: 39428					
Contact: WARREN KING			A SHUIL	_{Tel:} 601-433-4087					
Certification Number:			Expirati	Expiration Date:					
OTHER OPERATOR: N/A									
Address: N/A									
City: N/A		State: N/A		z _{ip:} N/A					
Contact: N/A			Tel: N/A						
V. WAS SITE INSPECTED TO DETERMINE PRESENCE OF ASBESTOS? (Yes/No): NO									
WAS ASBESTOS PRESENT? (Yes/No): ASSUMED			Inspection Date: N/A						
Inspector: N/A Certification Number: N/A				Expiration I	Date: N/A				
VI. SUSPECT MATERIALS SAMPLED AND PROCEDURES USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL:									
ASSUMED COATING									
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VII. QUANTITY OF RACM TO BE REMOVED:									
Pipes (LN FT): 632	Surface Area (S	Q FT): -	JA PI	Volume of Facility Co	mponents (CU FT): -				
VIII. QUANTITY OF NONFRIABLE ASBESTOS NOT REMOVED:									
Category I: N/A Category II: N/A									
IX. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: 08/01/2023 Complete: 10/30/2023									
X. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: Complete:									

XI. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:								
Adequately wet, wrap in shrink wrap, hit to disbond, place in wet labled double bag, twist and seal								
XII. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION OR RENOVATION SITE:								
Strip and Removal, Containment, Wet Method, Double Bagging								
XIII. WASTE TRANSPORTER #1	<u> </u>							
Name: KENT ENERGY								
Address: 1555 BEAULIEU LANE								
City: PORT ALLEN	State: LA		Zip: 70767					
Contact Person: JERRY HORNER	ntact Person: JERRY HORNER Tel: 225-718-0993							
WASTE TRANSPORTER #2								
Name: N/A								
Address: N/A								
City: N/A	State: N/A		Zip: N/A					
Contact Person: N/A			Tel: N/A					
XIV. WASTE DISPOSAL SITE								
Name: WASTE MANAGEMENT WOODSIDE								
Address: 29340 WOODSIDE DRIVE								
City: WALKER	State: LA		_{Zip:} 70785					
Contact Person: N/A			Tel: N/A					
XV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW:								
Name: N/A Title: N/A								
Authority: N/A								
Date of Order (MM/DD/YY): N/A Date Ordered to Begin (MM/DD/YY): N/A								
XVI. FOR EMERGENCY RENOVATIONS: N/A								
Date and Hour of Emergency (MM/DD/YY): N/A								
Description of the sudden unexpected event:								
N/A								
Explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden:								
N/A								
XVII. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASTESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER:								
Stop work and reevaluate pipe coating removal method to alleviate making friable coating nonfriable.								
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.								
PHILIP HUX	Phil	ip Hus	£	7/13/2023				
Type or Print Name	(Signature of Ow	her/Operator)		(Date)				
XIX. I CERTIFY THAT THE ABOVE INFORMATION IS CORI	RECT: Philip Hux	Digitally signo Date: 2023.0	ed by Philip Hux 7.13 13:28:17 -05'00'	7/13/2023				
Type or Print Name	(Signature of Owner/Operator)		(Date)					