

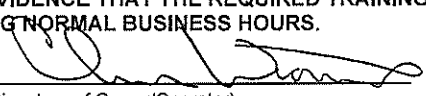
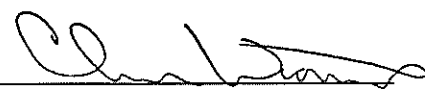
MAP

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 type="checkbox"/> Email <input type="checkbox"/> Mail <input checked="" type="checkbox"/> Hand Delivery		Postmark (mail only)	Date Received 8-8-2023	AI Number
I. Type of Notification (O=Original R=Revised C=Canceled A= Annual): O - Info Only				
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): Woolfolk Middle School-T101,T102,T201,T202				
Bldg. Name: Woolfolk Middle School				
Address: 209 West 5th Street				
City: Yazoo City		State: MS	Zip: 39194	
Site Location: 209 West 5th Street, Yazoo City, MS 39194			Tel: 662-746-2904	
Building Size: 60,000 +/-		# of Floors: 2	Age in Years: 80 +/-	
Present Use: School		Prior Use: School		
IV. FACILITY INFORMATION (Identify owner, asbestos removal contractor, and other operator)				
OWNER NAME: Yazoo City Municipal School District				
Address: 1133 Calhoun St				
City: Yazoo City		State: MS	Zip: 39194	
Contact: Jermall Wright			Tel: 662-746-2904	
ASBESTOS REMOVAL CONTRACTOR: Jeff Evans, Inc d/b/a Eagle Construction				
Address: 1450 Old Brandon Rd				
City: Flowood		State: MS	Zip: 39232	
Contact: Chuck Womack			Tel: 601-940-5411	
Certification Number: ABC-1799			Expiration Date: 3/4/2023	
OTHER OPERATOR: Mills Contracting				
Address: 207 West Jackson St				
City: Ridgeland		State: MS	Zip: 39157	
Contact: Trammel Martin			Tel: 601-624-7150	
V. WAS SITE INSPECTED TO DETERMINE PRESENCE OF ASBESTOS? (Yes/No): Yes				
WAS ASBESTOS PRESENT? (Yes/No): Yes			Inspection Date: 8/9/2022	
Inspector: Willie Nester		Certification Number: ABI-2244	Expiration Date: 1/19/2023	
VI. SUSPECT MATERIALS SAMPLED AND PROCEDURES USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL:				
FT/M, Window caulk, tar paper		PLM		
VII. QUANTITY OF RACM TO BE REMOVED: 140 sf FT/M				
Pipes (LN FT):		Surface Area (SQ FT): 140	Volume of Facility Components (CU FT):	
VIII. QUANTITY OF NONFRIABLE ASBESTOS NOT REMOVED: N/A				
Category I:			Category II:	
IX. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: 8/11/2023			Complete: 8/12/2023	
X. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: 8/11/2023			Complete: 12/31/2023	

RECEIVED
8/9/23
DEPT. OF ENVIRONMENTAL QUALITY

XI. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:		
Removal of asbestos containing materials with hand tools		
XII. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION OR RENOVATION SITE:		
Stop work and notify competent person, keep wet, seal all critical barriers & put under negative pressure		
XIII. WASTE TRANSPORTER #1		
Name: ADS, Inc		
Address: P. O. Box 1296		
City: Clinton	State: MS	Zip: 39060-1296
Contact Person: Mark Parkman		Tel: 601-925-0507
WASTE TRANSPORTER #2		
Name: Eagle Construction		
Address: 1450 Old Brandon Rd		
City: Flowood	State: MS	Zip: 39232
Contact Person: Chuck Womack		Tel: 601-940-5411
XIV. WASTE DISPOSAL SITE		
Name: Little Dixie Landfill		
Address: 1716 North County Line Rd		
City: Ridgeland	State: MS	Zip: 39157
Contact Person:		Tel: 601-982-9488
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:		
Stop work & notify owner, keep wet and double bag immediately		
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.		
Chuck Womack		8/8/2023
Type or Print Name	(Signature of Owner/Operator)	(Date)
XIX. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT:		
Chuck Womack		8/8/2023
Type or Print Name	(Signature of Owner/Operator)	(Date)