## MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

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

MDEQ Use Only:  XEmail □Mail □Hand Delivery 01/16/2025 A	* * * * * * * * * * * * * * * * * * * *	Date Received 01/07/2025 & 01/09/2025		Al Number 81856			
I. Type of Notification (O=Original R=Revised C=Canceled A= Annual):							
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):							
Bldg. Name: Highway Village Bldg B							
Address: 506 Front Street Extension							
<sub>City:</sub> Meridian	State: MS	State: MS		<sub>Zip:</sub> 39301			
Site Location: Building B Windows	,		<sub>Tel:</sub> 601-693-4285				
Building Size: 4500 sf	# of Floors:2		Age in Years: 85 yrs				
Present Use: Multi Family Housing	Prior Use: Multi	Prior Use: Multi Family Housing					
IV. FACILITY INFORMATION (Identify owner, asbestos removal contractor, and other operator)							
OWNER NAME: Meridian Housing Authority							
Address: 606 16th St							
<sub>City:</sub> Meridian	<sub>State:</sub> MS		<sub>Zip:</sub> 39301				
Contact: Cade Mitchell			Tel: 601-826-3964				
ASBESTOS REMOVAL CONTRACTOR: MAK Environmental, LLC							
Address: 17115 Finnell Rd							
City: Northport	State: AL		<sub>Zip:</sub> 35475				
Contact: Aubry L McCarley			Tel: 205-310-8863				
Certification Number: ABC-00007308 Expirati		Expiration	on Date: 1-15-25 01/10/2026				
OTHER OPERATOR: None							
Address: NA							
City:	State:	State:		Zip:			
Contact:			Tel:				
V. WAS SITE INSPECTED TO DETERMINE PRESENCE OF	ASBESTOS? (Yes/N	o):Yes					
WAS ASBESTOS PRESENT? (Yes/No): Yes	T? (Yes/No): Yes Inspect		on Date: 6-24-24				
L. Rosie Jackson Codificati	on Number: ABI-00	Number ABI-00011405 Expiration Date: 4-23-25					
vi. suspect materials sampled and procedures used to detect the presence of asbestos material: Ceiling texture, Window/door caulk, flooring and mastic was tested using PLM method.							
Only the window caulk was positive for asbestos.							
LBP inspection Date 5-28-24, Inspector Rosie Jackson #LIN04233B1BF1F8  MAK LBP Firm #PBF-00000570 Exp 4-18-25 Aubry McCarley LBP Supervisor #PBS-00007598 Exp 4-18-25							
VII. QUANTITY OF RACM TO BE REMOVED: Caulking on 42 windows (component removal)							
				mponents (CU FT): 2 cuft			
Pipes (LN FT): 0 Surface Area (SQ FT): 0 Volume of Facility Components (CU FT): 2 CUΠ  VIII. QUANTITY OF NONFRIABLE ASBESTOS NOT REMOVED: 0							
Category I: 0  Category II: 0  Category II: 0							
IX SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: 1-23-25 Complete: 1-24-25							
X. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: 1-25-25  Complete: 4-2425							

VI DECODIDETION OF BUANNESS DEMONSTRATION OF BUILDING			
XI. DESCRIPTION OF PLANNED DEMOLITION OR RI New windows will be installed after old	ENOVATION WORK, AND M I windows are remo	етнор(s) то ве used: ved and caulk is a	abated.
XII. DESCRIPTION OF WORK PRACTICES AND ENGI DEMOLITION OR RENOVATION SITE:	NEERING CONTROLS TO B	E USED TO PREVENT E	MISSIONS OF ASBESTOS AT THE
Windows will be removed using wet m	ethod. Interior side	of window opening	na will be sealed and
ground will be covered with plastic she	eting to prevent cro	ss contamination.	
XIII. WASTE TRANSPORTER #1	,		
<sub>Name:</sub> Burns Waste		t	
Address: 24 Burns Dr			
<sub>City:</sub> Columbus	State: MS	Zip:39702	
Contact Person: Raygan Gibson		Tel: 662-848	-2484
WASTE TRANSPORTER #2 None			
Name: NA			
Address:			
City:	State:	Zip:	
Contact Person:		Tel:	
XIV. WASTE DISPOSAL SITE			
Name: Robo Landfill			
Address:6447 Wahalak Rd			
<sub>City:</sub> Scooba	State: MS	Zip: 39358	
Contact Person: Roland Edmonds		Tel: 662-361-	-0300
XV. IF DEMOLITION ORDERED BY A GOVERNMENT A	GENCY, PLEASE IDENTIFY	THE AGENCY BELOW:	
Name: NA		ïtle:	
Authority:			
Date of Order (MM/DD/YY):	Date Ord	lered to Begin (MM/DD/YY	<b>(</b> ):
XVI. FOR EMERGENCY RENOVATIONS:			
Date and Hour of Emergency (MM/DD/YY);			
Description of the sudden unexpected event:			
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Explanation of how the event caused unsafe conditions or	would cause equipment dam	age or an unreasonable fi	nancial burden:
XVII. DESCRIPTION OF PROCEDURES TO BE FOLLOW NONFRIABLE ASTESTOS MATERIAL BECOMES CRUI	WED IN THE EVENT THAT U	NEXPECTED ASBESTO	S IS FOUND OR PREVIOUSLY
Keep wet and expand containment. No	otify asbestos inspe	ctor to test suspec	ct material. If positive for
asbestos, we will revise notification.		·	·
XVIII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN TH ONSITE DURING THE DEMOLITION OR RENOVATION, THIS PERSON WILL BE AVAILABLE FOR INSPECTION	AND EVIDENCE THAT THE	REQUIRED TRAINING I	RT 61, SUBPART M) WILL BE HAS BEEN ACCOMPLISHED BY
Aubry L McCarley	Mul2 Mal	and	1-6-25
Type or Print Name	(Signature of Owner/Oper	ator)	(Date)
XIX. I CERTIFY THAT THE ABOVE INFORMATION IS CO Aubry L McCarley	ORRECT:		1-6-25
Type or Print Name	(Signature of Owner/Oper	ator)	(Date)



## 17115 Finnell Rd, Northport, AL 35475 Office (205)210-5096 Fax (205)210-5599

To Whom It May Concern,

MAK Environmental, LLC (MAK) is the asbestos abatement contractor that will remove the windows with asbestos containing caulk at the Highway Village, Meridian, MS. The aluminum windows have a mill finish and the brick veneer is unpainted. A lead test was performed at the same time as the asbestos survey and it was determined that there was no lead paint associated with the windows or window openings. MAK will take pictures before, during and after the abatement for record keeping purposes. Should you have any questions or need more information, do not hesitate to give me a call on my cell phone (205-310-8863).

Regards.

Aubry L McCarley

Member

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