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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 06/26/2024	AI Number
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): D = DEMO				
III. FACILITY DESCRIPTION (Include building name, number and floor or room number):				
Bldg. Name: THREE RIVERS (RESIDENTIAL HOUSE)				
Address: 85 SOUTH MAIN STREET				
City: PONTOTOC	State: MS	Zip: 38863		
Site Location: 85 SOUTH MAIN STREET, PONTOTOC, MS			Tel: 662-489-2567	
Building Size: 1,900 SF	# of Floors: 2	Age in Years: 60 + -		
Present Use: VACANT	Prior Use: SINGLE FAMILY RESIDENT			
IV. FACILITY INFORMATION (Identify owner, asbestos removal contractor, and other operator)				
OWNER NAME: THREE RIVER DEVELOPMENT				
Address: 75 SOUTH MAIN STREET				
City: PONTOTOC	State: MS	Zip: 38863		
Contact: GRADEN HOOKER	Tel: 662-489-2567			
ASBESTOS REMOVAL CONTRACTOR: BELL ENVIRONMENTAL SERVICES, LLC.				
Address: P.O. BOX 133				
City: DELTA CITY	State: MS	Zip: 39061		
Contact: JIMMY BELL	Tel:			
Certification Number: ABC-00001282	Expiration Date: 12/15/2024			
OTHER OPERATOR: HOOKE CONSTRUCTION, INC.				
Address: P.O. BOX 8				
City: THAXTON	State: MS	Zip: 38871		
Contact: GRADEN HOOKER	Tel: 662-489-2567			
V. WAS SITE INSPECTED TO DETERMINE PRESENCE OF ASBESTOS? (Yes/No): YES				
WAS ASBESTOS PRESENT? (Yes/No): SUSPECTED FLOOR TILE/WINDOWS Inspection Date: 6/17/24				
Inspector: EDWARD LESNIAK	Certification Number: ABZ-00001230	Expiration Date: 6/19/24		
VI. SUSPECT MATERIALS SAMPLED AND PROCEDURES USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL:				
FLOOR TILE/MASTIC, windows, siding. All will be treated and disposed as asbestos containing materials. samples were taken and sent to EMSL ANALYTICAL, INC. BATON ROUGE, LA 70809 and analyzed using the PLM method.				
VII. QUANTITY OF RACM TO BE REMOVED:				
1,200 SF FLOOR TILE/MASTIC / 8 WINDOWS CAULKING / TRANSITE SIDING				
Pipes (LN FT): 0	Surface Area (SQ FT): 1,200 SF	Volume of Facility Components (CU FT): 0		
VIII. QUANTITY OF NONFRIABLE ASBESTOS NOT REMOVED:				
Category I: <input checked="" type="checkbox"/>	Category II: <input type="checkbox"/>			
IX. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: 7/11/24 Complete: 7/15/24				
X. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: 7/16/24 Complete: 8/16/24				

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XI. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:
Wet Method, Containment, Neg-Air, Double Bag. REMOVE ALL FLOOR TILE/MASTIC/
Windows Siding AS ASBESTOS MATERIALS

XII. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE
DEMOLITION OR RENOVATION SITE: PREP WORK AREA, SIGNS, 6 MIL POLY OVER WINDOW. WET AND REMOVE
ALL SUSPECTED ASBESTOS MATERIALS. Double Bag, Drop TAG, TAPE PLACE INTO LINED DUMPSTER
REMOVE Windows And Siding intact, WRAP Windows IN 6 MIL POLY.

XIII. WASTE TRANSPORTER #1

Name: Construction Waste Management, Inc.

Address: P.O. BOX 2489

City: Oxford State: MS Zip: 38655

Contact Person: TONI SPENCER Tel: 662-513-7999

WASTE TRANSPORTER #2 N/A

Name:

Address:

City: State: Zip:

Contact Person: Tel:

XIV. WASTE DISPOSAL SITE

Name: THREE RIVER REGIONAL LANDFILL

Address: 1904 PARKWAY WEST

City: Pontotoc State: MS Zip: 38863

Contact Person: ALICIA CHISM 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
REMAIN UNDER CONTAINMENT/NEG-AIR, CONTINUE TO KEEP WET, CONTACT OWNER AND MDER-
OF CHANGE, FOLLOW MDER DIRECTION, REVISE 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 Jim Bell (Signature of Owner/Operator) 6/26/24 (Date)

XIX. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT: Jimmy Bell Type or Print Name Jim Bell (Signature of Owner/Operator) 6/26/24 (Date)