

MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

Mail notification to: **MDEQ Asbestos Section, 515 E. Amite Street, Jackson, MS 39201**

Operator Project #	Postmark	Date Received (MDEQ use only) 7.14.2022 em	Notification # (MDEQ use only)		
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) -D-					
III. FACILITY DESCRIPTION (Include building name, number and floor or room number)					
Bldg. Name: OLD ROADWAY TRUCKING BILDING					
Address 6200 M STREET					
City: MERIDIAN	State: MS	Zip: 39307			
Site Location: 6200 M STREET MERIDIAN		Tel:			
Building Size 42,300	# of Floors: 1	Age in Years: 45			
Present Use: VACANT	Prior Use: TRUCKING DOCK & OFFICE				
IV. FACILITY INFORMATION (Identify owner, removal contractor, and other operator)					
OWNER NAME: 186 REFUELING WING, MS AIR NATIONAL GUARD					
Address: 6225 M STREET					
City: MERIDIAN	State: MS	Zip: 39307			
Contact: KENT JOYNER	Tel: 601-626-8090				
REMOVAL CONTRACTOR BILLY SHUMATE CONSTRUCTION					
Address: P.O. BOX 4279					
City: MERIDIAN	State: MS	Zip: 39304			
Contact: BILLY SHUMATE	Tel: 601-934-9337				
OTHER OPERATOR: J & J CONSTRUCTION					
Address: 9301 MS 19 ,					
City: COLLINSVILLE	State: MS	Zip: 39325			
Contact: KENT JOYNER					
V. IS ASBESTOS PRESENT? (Yes/No) YES					
VI. PROCEDURE, INCLUDING ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL (Include inspector name and date of inspection): PAUL ANDERSON, PLM , 3-22-21					
VII. APPROXIMATE AMOUNT OF ASBESTOS INCLUDING:		Nonfriable Asbestos Material Not To Be Removed			
1. Regulated ACM to be Removed 2. Category I ACM Not Removed 3. Category II ACM Not Removed		Indicate Unit of Measurement Below			
		Category I	Category II		
Pipes	RACM To Be Removed			Ln Ft:	Ln M:
Surface Area		FLOOR TILE AND MASTIC		Sq Ft: 6000	Sq M:
Vol RACM Off Facility Component				Cu Ft:	Cu M:
VIII. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: 9-28-22		Complete: 10-4-22			
IX. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: 10-4-22		Complete: 10-25-22			

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:

TOTAL DEMOLITION OF METAL BUILDING AND REMOVAL OF CONCRETE TR. DOCK

XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION OR RENOVATION SITE:

WET METHOD, DOUBLE BAGGING

XII. WASTE TRANSPORTER #1

Name: **BILLY SHUMATE CONSTRUCTION**

Address: **P.O. BOX 4279**

City: **MERIDIAN**

State: **MS**

Zip: **39304**

Contact Person **BILLY SHUMATE**

Tel: **601-934-9337**

WASTE TRANSPORTER #2

Name:

Address:

City:

State:

Zip:

Contact Person:

Tel:

XIII. WASTE DISPOSAL SITE

Name: **PINERIDGE LANDFILL, WASTE MANAGEMENT**

Address: **520 MURPHY ROAD**

City: **MERIDIAN**

State: **MS**

Zip: **39301**

Tel: **601-483-0715**

XIV. 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):

XV. 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:

XVI. 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:

AS PER MDEQ REQUIREMENTS

XVII. 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.

BILLY SHUMATE CONST.

Type or Print Name

Billy Shumate
(Signature of Owner/Operator)

9-14-22

(Date)

XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT:

BILLY SHUMATE CONST.

Type or Print Name

Billy Shumate
(Signature of Owner/Operator)

9-14-22

(Date)