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)	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: Residential House

Address 158 E COHEA ST

City: Jackson	State: MS	Zip: 39202
Site Location: Same as above		Tel:
Building Size 1,693	# of Floors: 1	Age in Years: 76
Present Use: Vacant	Prior Use: Residential	

IV. FACILITY INFORMATION (Identify owner, removal contractor, and other operator)

OWNER NAME: RANDLE MAMIE H & BAKER KEVIN

Address: 221 MAGNOLIA ST

City: JACKSON	State: MS	Zip: 39203
Contact: CITY OF JACKSON		Tel: 601-960-1054

REMOVAL CONTRACTOR R&C SERVICES, LLC

Address: P.O. Box 7038

City: Jackson	State: MS	Zip: 39282
Contact: Raymond Coanderson		Tel: 662 897 9979

OTHER OPERATOR:

Address:

City:	State:	Zip:

Contact:

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):

SAMANTHA GRAVES / JAN. 07, 2020/ EPA 600/R-93-116 POLORIZED LIGHT MICROSCOPY

VII. APPROXIMATE AMOUNT OF ASBESTOS INCLUDING: 1. Regulated ACM to be Removed 2. Category I ACM Not Removed 3. Category II ACM Not Removed	RACM To Be Removed	Nonfriable Asbestos Material Not To Be Removed		Indicate Unit of Measurement Below	
		Category I	Category II	UNIT	
Pipes				LnFt:	Ln M:
Surface Area				SqFt:	Sq M:
Vol RACM Off Facility Component				CuFt:	Cu M:

VIII. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: 10/12/2020 Complete: 10/15/2020

IX. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: 10/19/2020 Complete: 11/19/2020

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:
An excavator will be used to demo property

XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION OR RENOVATION SITE: work will be done with few people as possible properly marked waste disposal bags, PPE, work area will be segregated non-powered hand tools will be used with disposal rags and water buckets

XII. WASTE TRANSPORTER #1

Name: City of Jackson Byram Landfill

Address: 6810 I-55 South Frontage Rd

City: Byram | State: MS | Zip: 39272

Contact Person: | Tel: 601-960 1193

WASTE TRANSPORTER #2

Name:

Address:

City: | State: | Zip:

Contact Person: | Tel:

XIII. WASTE DISPOSAL SITE

Name: City of Jackson Byram Landfill

Address: 6810 I-55 South Frontage Rd

City: Byram | State: MS | Zip: 39272

Tel: 601 960 1193

XIV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW:

Name: ROBERT BRUNSON | Title: Code Enforcement Supervisor

Authority: CITY OF JACKSON

Date of Order (MM/DD/YY): 6/9/2020 | 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 ASTESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER: Cease work with all power equipment and follow method above

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.

Raymond Coranderson (Type or Print Name) Raymond Hearsh (Signature of Owner/Operator) 9/11/20 (Date)

XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT:

Raymond Coranderson (Type or Print Name) Raymond Hearsh (Signature of Owner/Operator) 9/11/20 (Date)

Landroll Detail

Parcel Number	Map Reference Number
67-15	648.00 1 317.00
Subdivision No.	Homestead Exemption Account Numbers
1230	

View Map
Property Taxes
Gis Map

Assessed Owner
BALLARD MACK B & JOHN H SR
1523 TRACEWOOD DR
JACKSON MS 39211-2134

Location
1113 **CRESTVIEW AVE**

Legal Description
LOT 15 NEARVIEW SUBN

Acreage Info.	
Cultivated Acres	0.00
Uncultivated Acres	0.00

Assessed Values	
Land Value	2,538
Improvement Value	374
Total	2,912
Appraised Values	
Land Value	16,920
Improvement Value	2,490
Total	19,410
Building Info.	
Type	RES
Base Area	1,248
Adjusted Area	1,280
Year Built	1930
Deed Info.	
Book & Page	7156-1025
Date	02/13/2013

Back Search

Landroll Detail

Parcel Number	Map Reference Number
72-77	656.00 1 158.00
	View Map Property Taxes Gis Map
Subdivision No.	Homestead Exemption Account Numbers
1327	

Assessed Owner

RANDLE MAMIE H & BAKER KEVIN
221 MAGNOLIA ST
JACKSON MS 39203

Location

158 E **COHEA ST**
AB

Legal Description

50 FT S END LOT 8 NUGENTS SUBN OF CONDON SY N J

Acreage Info.	
Cultivated Acres	0.00
Uncultivated Acres	0.00

Assessed Values	
Land Value	975
Improvement Value	30
Total	1,005
Appraised Values	
Land Value	6,500
Improvement Value	200
Total	6,700
Building Info.	
Type	RES
Base Area	1,693
Adjusted Area	1,729
Year Built	1944
Deed Info.	
Book & Page	7193-3769
Date	08/08/2016

Back **Search**

EMSL Analytical, Inc.
18369 Petroleum Drive Baton Rouge, LA 70809
Tel/Fax: (225) 755-1920 / (225) 755-1969
http://www.EMSL.com / batonrougelab@emsl.com

EMSL Order: 252000163
Customer ID: COJA62
Customer PO:
Project ID:

Attention: Samantha Graves
City of Jackson
PO Box 17
Jackson, MS 39205-0017

Phone: (601) 960-1054
Fax: (601) 960-1700
Received Date: 01/13/2020 8:55 AM
Analysis Date: 01/15/2020
Collected Date: 01/07/2020

Project: 158 COHEA ST (2019-1265)

Test Report: Asbestos Analysis of Bulk Materials via EPA 600/R-93/116 Method using Polarized Light Microscopy

			Non-Asbestos		Asbestos
Sample	**Description**	**Appearance**	**% Fibrous**	**% Non-Fibrous**	**% Type**
C1 *252000163-0001*	Shingle	Black Fibrous Homogeneous	10% Glass	90% Non-fibrous (Other)	None Detected
C2 *252000163-0002*	Living Room - Plaster	Gray Non-Fibrous Homogeneous		100% Non-fibrous (Other)	None Detected
C3 *252000163-0003*	Fireplace - Mortar	Red Non-Fibrous Homogeneous		100% Non-fibrous (Other)	None Detected
C4 *252000163-0004*	Back Bedroom - Burned Debris	Black Non-Fibrous Homogeneous		100% Non-fibrous (Other)	None Detected
C5 *252000163-0005*	Back Bedroom - Wall Sheetrock	White Fibrous Homogeneous	5% Cellulose	95% Non-fibrous (Other)	None Detected
C6 *252000163-0006*	Back Bedroom - Duct Insulation	Tan Fibrous Homogeneous	15% Min. Wool 60% Glass	25% Non-fibrous (Other)	None Detected

Analyst(s)
Tyler Pullig (6)

Jamie Laginess

Jamie Laginess, Laboratory Operations Manager
or Other Approved Signatory

EMSL maintains liability limited to cost of analysis. The above analyses were performed in general compliance with Appendix E to Subpart E of 40 CFR (previously EPA 600/M4-82-020 "Interim Method"), but augmented with procedures outlined in the 1993 ("final") version of the method. This report relates only to the samples reported above, and may not be reproduced, except in full, without written approval by EMSL. EMSL bears no responsibility for sample collection activities or analytical method limitations. Interpretation and use of test results are the responsibility of the client. All samples received in acceptable condition unless otherwise noted. This report must not be used by the client to claim product certification, approval, or endorsement by NVLAP, NIST or any agency of the federal government. EMSL recommends gravimetric reduction for all non-friable organically bound materials prior to analysis. Estimation of uncertainty is available on request.

Samples analyzed by EMSL Analytical, Inc. Baton Rouge, LA NVLAP Lab Code 200375-0, LELAP 01950, TX 300238

Initial report from: 01/15/2020 10:02:57

OrderID: 252000163

Asbestos Chain of Custody

EMSL ANALYTICAL, INC.

EMSL Order Number *(Lab Use Only)*: 01663

PHONE:
FAX:

Company Name: CITY OF JACKSON	**EMSL Customer ID:** COJA62
Street: P.O. BOX 17	**City:** JACKSON **State/Province:** MS
Zip/Postal Code: 39205 **Country:** USA	**Telephone #:** 601-960-1054 **Fax #:**
Report To (Name): SAMANTHA GRAVES	**Please Provide Results:** ☐ Fax ☑ Email
Email Address: sgraves@jacksonms.gov	**Purchase Order:**
Project Name/Number: 158 COHEA ST (2019-1265)	**EMSL Project ID** *(Internal Use Only)*:
U.S. State Samples Taken: MS	**CT Samples:** ☐ Commercial/Taxable ☐ Residential/Tax Exempt

EMSL-Bill to: ☑ Same ☐ Different - If Bill to is Different note instructions in Comments**
Third Party Billing requires written authorization from third party

Turnaround Time (TAT) Options* – Please Check

☐ 3 Hour ☐ 6 Hour ☐ 24 Hour ☐ 48 Hour ☐ ☒ 72 Hour ☐ 96 Hour ☐ 1 Week ☐ 2 Week

*For TEM Air 3 hr through 6 hr, please call ahead to schedule. *There is a premium charge for 3 Hour TEM AHERA or EPA Level II TAT. You will be asked to sign an authorization form for this service. Analysis completed in accordance with EMSL's Terms and Conditions located in the Analytical Price Guide.

PCM - Air ☐ Check if samples are from NY
- ☐ NIOSH 7400
- ☐ w/ OSHA 8hr. TWA

PLM - Bulk (reporting limit)
- ☑ PLM EPA 600/R-93/116 (<1%)
- ☐ PLM EPA NOB (<1%)

Point Count
- ☐ 400 (<0.25%) ☐ 1000 (<0.1%)

Point Count w/Gravimetric
- ☐ 400 (<0.25%) ☐ 1000 (<0.1%)
- ☐ NYS 198.1 (friable in NY)
- ☐ NYS 198.6 NOB (non-friable-NY)
- ☐ NYS 198.6 SOF-V
- ☐ NIOSH 9002 (<1%)

TEM – Air ☐ 4-4.5hr TAT (AHERA only)
- ☐ AHERA 40 CFR, Part 763
- ☐ NIOSH 7402
- ☐ EPA Level II
- ☐ ISO 10312

TEM - Bulk
- ☐ TEM EPA NOB
- ☐ NYS NOB 198.4 (non-friable-NY)
- ☐ Chatfield SOP
- ☐ TEM Mass Analysis-EPA 600 sec. 2.5

TEM – Water: EPA 100.2
- Fibers >10µm ☐ Waste ☐ Drinking
- All Fiber Sizes ☐ Waste ☐ Drinking

TEM- Dust
- ☐ Microvac - ASTM D 5755
- ☐ Wipe - ASTM D6480
- ☐ Carpet Sonication (EPA 600/J-93/167)

Soil/Rock/Vermiculite*
- ☐ PLM CARB 435 - A (0.25% sensitivity)
- ☐ PLM CARB 435 - B (0.1% sensitivity)
- ☐ TEM CARB 435 - B (0.1% sensitivity)
- ☐ TEM CARB 435 - C (0.01% sensitivity)
- ☐ TEM Qual. via Filtration Technique
- ☐ TEM Qual. via Drop-Mount Technique

*Can not accept New York State Loose Fill Vermiculite Samples

Other:
- ☐

☐ Check For Positive Stop – Clearly Identify Homogenous Group

Filter Pore Size (Air Samples): ☐ 0.8µm ☐ 0.45µm

Samplers Name: SAMANTHA GRAVES **Samplers Signature:**

Sample #	Sample Description	Volume/Area (Air) HA # (Bulk)	Date/Time Sampled
C1	SHINGLE		1/7/2020
C2	LIVING ROOM PLASTER	14X15	1/7/2020
C3	MORTAR FIRE PLACE		1/7/2020
C4	BURNED DEBRIS BACK BED ROOM	12X14	1/7/2020
C5	WALL SHEETROCK BACK BEDROOM	12X14	1/7/2020
C6	DUCK INSULATION BACK BEDROOM	12X14	1/7/2020

Client Sample # (s): C1 - C6 **Total # of Samples:** 6

Relinquished (Client): **Date:** 1-10-20 **Time:**

Received (Lab): K. Brown **Date:** 1/13/2020 **Time:** 8:55am

Comments/Special Instructions:

Controlled Document – Asbestos COC – R9 – 10/30/2014

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(R) 8070 5073 5461
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