

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	Postmark (ma	il only)	Date Received 09-12-2024		Al Number 1631			
I. Type of Notification (O=Original R=Revised C=Canceled A= Annual): R								
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: Georgia-Pacific Monticello, LLC								
Address: 604 N Sandifer Hwy 604 N A Sandifer Hwy								
City: Monticello		State: MS		zip: 39654				
Site Location: DA1, DA2, DA3, DA4, DA8, DA12, DA14, DA20, DA2			1	Tel: 404-652-6258				
Building Size: 13,200		# of Floors: Varies		Age in Years: Varies (Approx. 50)				
Present Use: Decommissioned	sent Use: Decommissioned Prior Use: Manufacturer							
IV. FACILITY INFORMATION (Identify owner, asbestos removal contractor, and other operator)								
_{OWNER NAME:} Georgia-Pacific Monticello, LLC								
Address: 133 Peachtree Street, NE - 20th Floor								
City: Atlanta State: GA				Zip: 30303				
Contact: Shannon Johnson				_{Tel:} 404-652-6258				
ASBESTOS REMOVAL CONTRACTOR: Brandenburg Industrial Service Company								
Address: 2217 Spillman Drive								
_{City:} Bethlehem		State: PA		_{Zip:} 18015				
Contact: Jay Jasinowski				_{Tel:} 312-287-5173				
Certification Number: ABC-00012434			Expiration	Expiration Date: 01/13/2025				
OTHER OPERATOR: Demolition Contract - Same as Asbestos Removal Contractor								
Address:								
City:		State:		Zip:				
Contact:				Tel:				
V. WAS SITE INSPECTED TO DETERMINE PRESENCE OF ASBESTOS? (Yes/No): Yes								
WAS ASBESTOS PRESENT? (Yes/No): Yes	on Date: 10/25/202	3						
nspector: Geoffrey Jay Certification Number: ABI-00012274 Expiration Date: 11/17/2023								
VI. SUSPECT MATERIALS SAMPLED AND PROCEDURES USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL:								
Materials Sampled: Pipe Thermal System Insulation, Caulk, Gaskets, Concrete 								
Detection Method: Bulk Samples via EPA 600/R-93-116 (PLM)								
VII. QUANTITY OF RACM TO BE REMOVED: Pipe TSI								
Pipes (LN FT): 400	Surface Area (S	Q FT):	\	√olume of Facility Cor	nponents (CU FT):			
VIII. QUANTITY OF NONFRIABLE ASBESTOS NOT REMOVED: Gaskets								
Category I: 50 SF Category II:								
IX. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: 09/04/2024 Complete: 09/28/2024								
X. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: 09/08/2024 Complete: 10/25/2024								

XI. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:								
Removal of Pipe TSI via Glove Bag/Wrap and Cut - Demolition of structures via a combination of crane, hydraulic equipment, and manual labor								
XII. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION OR RENOVATION SITE:								
Glove Bag, Adequately Wet Material During Removal, Regulated Area, Licensed Personnel performing removal, removal of entire facility component, structures will be wetted during demolition/dismantling work								
XIII. WASTE TRANSPORTER #1								
_{Name:} Republic Services								
Address: 1035 Old Brandon Rd								
City: Flowood	State: MS		_{Zip:} 39232					
Contact Person: Mike Raley			_{Tel:} 6014208243					
WASTE TRANSPORTER #2								
Name: Brandenburg Industrial Service Company								
Address: 2217 Spillman Drive								
_{City:} Bethlehem	State: PA		_{Zip:} 18015					
Contact Person: Jay Jasinowski			Tel: 312-287-5173					
XIV. WASTE DISPOSAL SITE								
Name: Little Dixie Landfill								
Address: 1716 County Line Rd								
City: Ridgeland	State: MS		Zip: 39157					
Contact Person: Mike Raley			Tel: 601-420-8243					
XV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW:								
ame: Title:								
Authority:								
ate 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:								
and a state decade and an established and added equipment durings of all differentiable interiorished builders.								
XVII. 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:								
Work will be stopped, material will be wetted, area will be barricaded off to prevent access, sample will								
taken by MDEQ accredited building inspec	tor							
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.								
Jay Jasinowski		2 /		9/12/2024				
Type or Print Name	(Signature of Owner/C	Operator)	_	(Date)				
XIX. I CERTIFY THAT THE ABOVE INFORMATION IS CORRE	:Ст: /	- J		9/12/2024				
Type or Print Name	(Signature of Owner)	Operator)		(Date)				
11		/		Y /				