

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 09-24-2024	AI Number
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: WEEMS CHILDREN and YOUTH SERVICES BUILDING				
Address: 1928 - 24th AVE.				
City: MERIDIAN		State: MS	Zip: 39301	
Site Location: 1928 - 24th AVE. basement & near kitchen area per contractor			Tel: 601-482-7377	
Building Size: 3000 sq.ft.		# of Floors: 1	Age in Years: 85	
Present Use: Weems children and youth service		Prior Use: RESIDENTIAL HOUSE		
IV. FACILITY INFORMATION (Identify owner, asbestos removal contractor, and other operator)				
OWNER NAME: WEEMS CHILDREN AND YOUTH CENTER				
Address: 1929 - 23rd AVE.				
City: MERIDIAN		State: MS	Zip: 39301	
Contact:			Tel: 601-482-7377	
ASBESTOS REMOVAL CONTRACTOR: BILLY SHUMATE CONSTRUCTION				
Address: P.O. BOX 4279		RETURN EMAIL to billyshumate@yahoo.com		
City: MERIDIAN		State: MS	Zip: 39304	
Contact: BILLY SHUMATE			Tel: 601-934-9337	
Certification Number: ABC-00001893			Expiration Date: AUG. 2nd 2025	
OTHER OPERATOR: BILLY SHUMATE CONSTRUCTION - DEMOLITION				
Address: P.O. BOX 4279				
City: MERIDIAN		State: MS	Zip: 39304	
Contact: BILLY SHUMATE			Tel: 601-934-9337 -	
V. WAS SITE INSPECTED TO DETERMINE PRESENCE OF ASBESTOS? (Yes/No): YES				
WAS ASBESTOS PRESENT? (Yes/No): YES			Inspection Date: 7-1-24	
Inspector: WILLIE J. NESTER		Certification Number: ABI-00002244	Expiration Date: JAN. 1st.,2025	
VI. SUSPECT MATERIALS SAMPLED AND PROCEDURES USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL: LINOLEUM, WINDOW PUDDY, WINDOW CAULK, SHEETROCK, ROOF SHINGLES, WALL PLASTER, PIPE WRAP, BOILER JACKET INSULATION.. - PLM -				
VII. QUANTITY OF RACM TO BE REMOVED: LINOLEUM - 500SF,, BOILER JACKET,, PIPE WRAP				
Pipes (LN FT): 75 PIPE WRAP		Surface Area (SQ FT): 80 BOILER JACKET	Volume of Facility Components (CU FT):	
VIII. QUANTITY OF NONFRIABLE ASBESTOS NOT REMOVED:				
Category I:			Category II:	
IX. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: 10-8-24			Complete: 10-11-24	
X. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: 10-12-24			Complete: 10-19-24	

XI. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:
TOTAL DEMOLITION OF STRUCTURE BY EXCAVATOR,, CLEAR SITE FOR NEW BUILDING TO BE BUILT.

XII. 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, CONTAINMENT, NEG. AIR,,

XIII. WASTE TRANSPORTER #1

Name: BILLY SHUMATE CONST.

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:

XIV. WASTE DISPOSAL SITE

Name: WASTE PRO - KEMPER COUNTY LANDFILL

Address: 21211 HWY 16 E.

City: DEKALB

State: MS.

Zip: 39328

Contact Person: PAMELA HOMES

Tel: 601-743-4310

XV. 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):

XVI. FOR EMERGENCY RENOVATIONS:

Date and Hour of Emergency (MM/DD/YY):

Description of the sudden unexpected event:

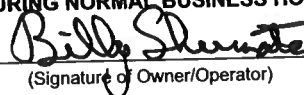
Explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden:

XVII. 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 AND REGULATIONS.

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.

BILLY SHUMATE CONST.

Type or Print Name


(Signature of Owner/Operator)

9-24-24

(Date)

XIX. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.

BILLY SHUMATE CONST.

Type or Print Name


(Signature of Owner/Operator)

9-24-24

(Date)