Mississippi Office of Pollution Control
Lead-Based Paint Abatement/Renovation Notification

Project Type: □ Abatement  □ Renovation  Date of Building Construction: 1950
Please check all applicable boxes for the type of Notification: □ Original □ Revision □ Cancellation □ Emergency
Please check if asbestos notification was also submitted for this project: □

I. PROJECT/SITE INFORMATION
   Target Housing: □
   Child-Occupied Facility: □
   Physical Address Project Site: 412 Jefferson Ave
   City: Clarksdale  State: MS  Zip Code: 38614  County: Coahoma
   Number of Units to be Abated/Renovated in the Building: 10

II. BUILDING OWNER INFORMATION
   Mr./Mrs.: Carolyn Dawson
   Address of Owner: 412 Jefferson Ave  City: Clarksdale  State: MS  ZIP: 38614
   Telephone Number: (662) 624-9565

III. ABATEMENT/RENOVATION CONTRACTOR INFORMATION
   Name of Certified Lead Abatement/Renovator Firm: Austin Floyd
   Firm Certification Number: PBR-00008576  Telephone Number: (662) 266-8801  Exp. Date: 03/23/2023
   Address of Certified Firm: 1109 County Road 59
   City: New Albany  State: MS  Zip Code: 38652

IV. INSPECTION INFORMATION
   Name of Renovator/Inspector/Risk Assessor Conducting Inspection:
   Certification Number:  ___________________________  Exp. Date:  ___________________________
   Date Inspection Conducted:  ___________________________
   Test Method Used & Manufacturer of Testing Equipment:
   For Paint Chip Analysis, Name of Laboratory:  ___________________________  Certification Number:  ___________________________

V. GENERAL CONTRACTOR (Other)
   Name of Firm: Windows USA
   Firm Mailing Address: PO Box 222  Royal, AR 71968
   Contact Person: Mia Walsh  Telephone Number: (501) 760-0309

VI. PROJECT DATES
   Lead Project Start: 05 / 17 / 2022  Lead Project Stop: 05 / 19 / 2022
   Abatement/Renovation to be done during what time? □ Day (5 a.m. – 5 p.m.) □ Evening (5 p.m. – 8 p.m.)
   □ Night (8 p.m. – 5 a.m.) □ Weekend

VII. DESCRIPTION OF PROCEDURES TO BE USED (CHECK ALL THAT APPLY)
   □ Wet Sanding  □ Component Removal  □ Heat Gun  □ Encapsulation
   □ Containment  □ Strip and Removal  □ Negative Air  □ Enclosure
   □ Other – Explain

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VIII. DESCRIPTION OF RENOVATION ACTIVITIES TO BE COMPLETED (INCLUDING COMPONENTS TO BE AFFECTED)
Retro Fit Pocket Replacement of Existing Windows with New Vinyl Windows

IX. WASTE TRANSPORTER
Name: Austin Floyd
Full Mailing Address: 1109 County Road 59
City: New Albany State: MS Zip Code: 38652
Contact: Austin Floyd Telephone Number: (662) 266-8801

X. WASTE LEAD DISPOSAL SITE
Site Name:
Physical Address:
Full Mailing Address:
City: State: Zip Code:

XI. DISPOSAL SITE FOR DEBRIS OTHER THAN LEAD
Site Name:
Physical Address:
Full Mailing Address:
City: State: Zip Code:
Contact Person: Telephone Number: (_____
NOTE: All debris (other than lead) should go to an authorized Rubbish Site, or to a permitted sanitary landfill.

XII. ABATEMENT
A certified supervisor is required for each abatement project and shall be onsite during all work site preparation and during the post-abatement cleanup and clearance of work areas. At all other times when abatement activities are being conducted, the certified supervisor shall be onsite or available by telephone, pager, or answering service, and able to be present at the work site in no more than 2 hours.

XIII. RENOVATION
A certified renovator is required for each renovation project and shall be physically present when the required signs are posted, while the required work area containment is being established, and while required work area cleaning is performed. The certified renovator must regularly direct work being performed by other individuals and must be available either onsite or by telephone at all times renovations are being conducted.

XIV. CERTIFICATION OF ACCURACY
I certify that all of the above information is correct.

Print Austin Floyd Signature Austin Floyd Date 05/10/2022

Contact information for return mail or questions concerning the information on this Notice
Mailing Address: 1109 County Road 59
City: New Albany State: MS Zip Code: 38652
Contact: Austin Floyd Telephone Number: (662) 266-8801
Email: contractor17@windowsusa.com

Refer to fee schedule to calculate required notification fee. Notification fee must be submitted with notification.

MAIL TO: Mississippi Department of Environmental Quality
Lead Notifications
P.O. Box 2261, Jackson, MS 39225

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