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

I. PROJECT/SITE INFORMATION
Target Housing: ☐
Child-Occupied Facility: ☐
Physical Address Project Site: 106 County Road 1752
City: Saftillo
State: MS
Zip Code: 38866
County: Lee
Number of Units to be Abated/Renovated in the Building: 18

II. BUILDING OWNER INFORMATION
Mr./Mrs.: Kasey or Amber Buse
Address of Owner: 106 County Road 1752
City: Saftillo
State: MS
ZIP: 38866
Telephone Number: (662) 397-6239

III. ABAITEMENT/RENOVATION CONTRACTOR INFORMATION
Name of Certified Lead Abatement/Renovator Firm: Terry Thomas
Firm Certification Number: FBR-00008574 Telephone Number: (662) 317-0181 Exp. Date: 01/05/2023
Address of Certified Firm: 1140 CR 73
City: New Albany
State: MS
ZIP: 38862

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: 03/07/2022
Lead Project Stop: 06/09/2022
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
☐ Containment ☐ Strip and Removal
☐ Other – Explain ☐ Heat Gun
☐ Negative Air ☐ Encapsulation
☐ Enclosure

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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: Terry Thomas
Full Mailing Address: 1140 CR 73
City: New Albany State: MS Zip Code: 38652
Contact: Terry Thomas Telephone Number: (662) 317-0181

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: Terry Thomas Signature: Terry Thomas Date: 06/12/2022

Contact Information for return mail or questions concerning the information on this Notice
Mailing Address: 1140 CR 73
City: New Albany State: MS Zip Code: 38652
Contact: Terry Thomas Telephone Number: (662) 317-0181
Email: terry.thomas@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