job-193257

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



MDEQ U	se Only:		Postmark (mail only)		te Received	AI Num	ber				
Email	Mail	Hand Delivery		10	1.7.202		The second second				
Please ch	eck all ap	plicable boxes for	Renovation D the type of Notification on was also submitted	on: Or	iginal Revisi	uction: 1975 on Cancell	stion Emerge	ency			
I.	Target Ho Child-Oc	cupied Facility:									
	Physical Address Project Site: 955 Bay Tree Dr City: Flowood State: MS Zip Code: 39232 County: Rankin										
	City: Flowood State: MS Zip Code: 39232 County: Rankin Number of Units to be Abated/Renovated in the Building: 5										
				munig				-			
II.	BUILDING OWNER INFORMATION Mr./Mrs.: Mitchell Trebotich										
		of Owner: 955 Bay		City: Flo	wood	State: MS	ZIP: 39232				
	Telephon	e Number: (601) 7	20-0784	_ City							
***				TOP IN	FORMATION	J	•				
III.	ABATEMENT/RENOVATION CONTRACTOR INFORMATION Name of Certified Lead Abatement/Renovator Firm: Gary Ogle										
	Firm Certification Number: PBR-00010175 Telephone Number: (601) 862-8033 Exp. Date: 07/06/2022										
	Address of Certified Firm: 126 Cape Charles										
	City: Bra		Sta	te: MS	prio 1901 Julion	Zip Code	: 39047				
				100 B 0 Sam	and the latest	360 to 140 1130	ach enverse				
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 Pain	t Chip Analysis,	Name of Laboratory:		Certific	cation Numb	er:				
v.	GENER	AL CONTRAC	TOR (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.	Lead Pr	CT DATES oject Start: 09	/14 /2022		Project Stop: _		2022				
	Abatem	ent/Renovation t	o be done during wha]Day (5 a.m. –]Night (8 p.m.		Evening (5 p:n Weekend	n. – 8 p.n			
VII	DESCR	IPTION OF PR	OCEDURES TO B	E USED	(CHECK ALI	L THAT AP	PLY)				
711.	☐ Wet	Sanding [ainment [ar – Explain	Component Remo Strip and Remova	val	Heat Gun Negative		Encapsulation Enclosure	1			

VIII. DESCRIPTION OF RENOVATION ACTIVITIES TO BE COMPLETED (INCLUDING COMPONENTS TO BE AFFECTED)

Retro Fit Pocket Replacement of Existing Windows with New Vinyl Windows

	Name: Gary Ogle Full Mailing Address: 126 Cape Cha	arles	sale a sale	100 00.11		
			State: MS		Zip Code: 39047	
	Contact: Gary Ogle					
	WASTE LEAD DISPOSAL SITE Site Name:					
	Physical Address:		of ser-			
	Full Mailing Address:			- 19		
	City:	Sta	te:	Zip C	Code:	
	DISPOSAL SITE FOR DEBRIS C Site Name:					
	Full Mailing Address:					
	City:	Sta	te:	Zip C	Code:	
XII.	Contact Person: NOTE: All debris (other than lead) sho ABATEMENT	uld go to an auth	orized Rubbi	er: ()_ish Site, or	to a permitted sanitary landfill.	
	A certified supervisor is required for each during the post-abatement cleanup and c being conducted, the certified supervisor able to be present at the work site in no n	learance of work shall be onsite or	areas. At all available by	other times	when abatement activities are	
****	RENOVATION					
λЩ	A certified renovator is required for each	renovation proje	ect and shall h		y present when the required signs	
AIII	are posted, while the required work area performed. The certified renovator must available either onsite or by telephone at	containment is be regularly direct	eing establish work being p	erformed b	y other individuals and must be	
	are posted, while the required work area performed. The certified renovator must	containment is be regularly direct all times renovati	eing establish work being p	erformed b	y other individuals and must be	
	are posted, while the required work area performed. The certified renovator must available either onsite or by telephone at CERTIFICATION OF ACCURACY I certify that all of the above information	containment is be regularly direct all times renovati	eing establish work being p ions are being	erformed b	y other individuals and must be	
	are posted, while the required work area performed. The certified renovator must available either onsite or by telephone at CERTIFICATION OF ACCURA	containment is be regularly direct all times renovati	eing establish work being p ions are being	erformed b g conducted	y other individuals and must be	
	are posted, while the required work area performed. The certified renovator must available either onsite or by telephone at CERTIFICATION OF ACCURACY I certify that all of the above information Print Gary Ogle Contact information for return mail or q	containment is be regularly direct all times renovati CY is correct. Signature _ uestions concerni	eing establish work being p ions are being	erformed by conducted	y other individuals and must be Date 09/07/2022	
	are posted, while the required work area performed. The certified renovator must available either onsite or by telephone at CERTIFICATION OF ACCURACT CERTIFICATION OF ACCURAC	containment is be regularly direct all times renovati CY is correct. Signature _ uestions concerni	eing establish work being p ions are being	erformed by conducted	y other individuals and must be Date 09/07/2022	
	are posted, while the required work area performed. The certified renovator must available either onsite or by telephone at CERTIFICATION OF ACCURACY I certify that all of the above information Print Gary Ogle Contact information for return mail or q	containment is be regularly direct all times renovati CY is correct. Signature _ uestions concerni	eing establish work being pions are being Garage Cing the inform	erformed by conducted	y other individuals and must be Date 09/07/2022 is Notice	

MAIL TO: Mississippi Department of Environmental Quality

Lead Notifications

P.O. Box 2261, Jackson, MS 39225