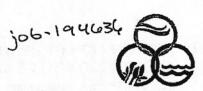
Mississippi Office of Pollution Control Lead-Based Paint Abatement/Renovation Notification



MDEQ (Use Only: I ☐Mail ☐Hand Delivery	Postmark (mail only)	Date Received 9.21.22	AI Number					
Please cl	Type: Abatement heck all applicable boxes for the heck if asbestos notifica	or the type of Notification:	Original Revision	tion: 1974 Cancellation Emergency					
I.	PROJECT/SITE INFO Target Housing: Child-Occupied Facility:								
		State: MS		ounty: Rankin					
	Number of Units to be Abated/Renovated in the Building: 16								
II.	BUILDING OWNER INFORMATION Mr./Mrs.: Charles Trotter								
	Address of Owner: 610 Ca Telephone Number: (601)		ity: Brandon	State: MS ZIP: 39047					
III.	ABATEMENT/RENOVATION CONTRACTOR INFORMATION								
	Name of Certified Lead Abatement/Renovator Firm: Brian Wralght								
	Firm Certification Number: PBR-00011222 Telephone Number: (601) 850-7154 Exp. Date: 01/18/2023								
	Address of Certified Firm: 121 David Henderson Rd								
		State:		Zip Code: 39145					
			A to be applied as a	2.5 0000.					
IV.	INSPECTION INFOR		inducting Inspection:						
	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.	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: 09	/28 /2022	Lead Project Stop: 09	/30 /2022					
	Abatement/Renovation to be done during what time? Day (5 a.m 5 p.m.) Evening (5 p.m 8 Night (8 p.m 5 a.m.) Weekend								
VII.	DESCRIPTION OF PROCEDURES TO BE USED (CHECK ALL THAT APPLY)								
	Wet Sanding Containment Other – Explain	Component Removal Strip and Removal	Heat Gun Negative Air	Encapsulation Enclosure					

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: Brian Wraight								
	Full Mailing Address: 121 David	Henderson Rd	140						
	City: Pelanatchie	Sta	te: MS	Zip	Code: 3	9145			
	City: Pelahatchie State: MS Zip Code: 39145 Contact: Brian Wraight Telephone Number: (601) 850-7154								
X.	WASTE LEAD DISPOSAL ST	TE							
	Site Name:	The second second			611	930 100 100 100 100 100 100 100 100 100 1			
	Physical Address:		4 (3)		Tell to law				
	Full Mailing Address:								
	City:	Sta	te:	Zip	Code:_				
XI.	DISPOSAL SITE FOR DEBRIS	S OTHER THAN	LEAD						
	Site Name:								
	Physical Address:	-							
	Full Mailing Address:								
	City:	Sta	te:	Zip	Code:				
	Contact Person:	Teleph	one Numi	ber: ()		Charles of the same			
XIII	being conducted, the certified supervise able to be present at the work site in note. RENOVATION A certified renovator is required for early posted, while the required work as performed. The certified renovator may available either onsite or by telephone	o more than 2 hours ach renovation proje ea containment is be ust regularly direct	ct and shal ing establis	I be physica shed, and w performed	lly preser hile requi by other	nt when the required signs ired work area cleaning is			
ΧIV	CERTIFICATION OF ACCUR		ous are bei	ng conducte	u.				
ZI V.	I certify that all of the above informati								
	Print Brian Wraight	Signature _	Brian	waigh	let	Date 09/21/2022			
	Contact information for return mail or questions concerning the information on this Notice								
	Mailing Address: 121 David Henderson Rd								
	City: Pelahatchie		State:	MS	Zip	Code: 39145			
	Contact: Brian Wraight			Number:	(601)8	50-7154			
	Email: brian.wraight@windowsusa.com								
D. C.			NI-4:C4:						
	r to fee schedule to calculate require			on tee mus	t be subt	nitted with notification.			
IVIAL	L TO: Mississippi Department of Lead Notifications P.O. Box 2261, Jackson, Mi		ангу						