

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



MDEQ Use Only: <input checked="" type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery	Postmark (mail only)	Date Received 9.20.22	AI Number
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Project Type: ☐ Abatement ☐ Renovation Date of Building Construction: 1962
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: 358 FOREST AVE.
City: JACKSON State: MS Zip Code: 39206 County: HINDS
Number of Units to be Abated/Renovated in the Building: 01

II. BUILDING OWNER INFORMATION

Mr./Mrs.: CRYSTAL GRAY
Address of Owner: 358 FOREST AVE. City: JACKSON State: MS ZIP: 39206
Telephone Number: ()

III. ABATEMENT/RENOVATION CONTRACTOR INFORMATION

Name of Certified Lead Abatement/Renovator Firm: MULTI-CON, INC.
Firm Certification Number: PBF00000620 Telephone Number: (601) 922-7777 Exp. Date: 8/17/2023
Address of Certified Firm: 4604 WOMACK DRIVE
City: JACKSON State: MS Zip Code: 39209

IV. INSPECTION INFORMATION

Name of Renovator/Inspector/Risk Assessor Conducting Inspection: DeJonnnette M. Grantham-King
Certification Number: PRA-00001657 Exp. Date: 9/12/2023 Date Inspection Conducted: 11/18/2021
Test Method Used & Manufacturer of Testing Equipment: XRF
For Paint Chip Analysis, Name of Laboratory: N/A Certification Number: N/A

V. GENERAL CONTRACTOR (Other)

Name of Firm: MULTI-CON, INC.
Firm Mailing Address: P. O. BOX 9325, JACKSON, MS 39286
Contact Person: JOE C. COLLINS Telephone Number: (601) 922-7777

VI. PROJECT DATES

Lead Project Start: 09 / 28 / 2022 Lead Project Stop: 10 / 30 / 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 Information found on Scope, I selected what is typically done and used for removing
LBP/STABILIZING AND REPAINTING LEAD COMPONENTS/INTERIM COTROL.

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

Remove & replace all Fascia & Soffit around the exterior of the house/prime and paint all the exterior Fascia board around the house. Stabilize & Repaint back porch ceiling. Remove, replace, prime and paint Carport, etc.

IX. WASTE TRANSPORTER

Name: MULTI-CON, INC.

Full Mailing Address: P. O. BOX 9325

City: JACKSON

State: MS

Zip Code: 39286

Contact: JOE C. COLLINS

Telephone Number: (601) 922-7777

X. WASTE LEAD DISPOSAL SITE

Site Name: AMERICAN DISPOSAL SERVICE

Physical Address: 5903 RIDGEWOOD PLACE, JACKSON, MS 39211

Full Mailing Address: 5903 RIDGEWOOD PLACE

City: JACKSON

State: MS

Zip Code: 39211

XI. DISPOSAL SITE FOR DEBRIS OTHER THAN LEAD

Site Name: FAIRCLOTH RUBBISH LANDFILL

Physical Address: 1312 SPRINGRIDGE ROAD, CLINTON, MS 39056

Full Mailing Address: 1312 SPRINGRIDGE ROAD

City: CLINTON

State: MS

Zip Code: 39056

Contact Person: TATE ZANKS

Telephone Number: (601) 922-5632

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 JOE C. COLLINS

Signature 

Date 09/20/2022

Contact information for return mail or questions concerning the information on this Notice

Mailing Address: P. O. BOX 9325

City: JACKSON

State: MS

Zip Code: 39286

Contact: JOE C. COLLINS

Telephone Number: (601) 922-7777

Email: multiconelec@comcast.net

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