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



MDEQ U Email	se Only: Mail Hand Delivery	Postmark (mail only)	Date Received	AI Number				
roject lease ch	Type: Abatement Leck all applicable boxes for	Renovation Date the type of Notification:	of Building Constructi Original Revision	ion: N/A  Cancellation Emergency SELE				
	heck if asbestos notificati			ONE				
I.	PROJECT/SITE INFORMATION  Target Housing: Child-Occupied Facility:  Physical Address Project Site:  30 Huppo Road							
	City: Picayune State: MS Zip Code: 39466 County: Pearl River							
	Number of Units to be Abated/Renovated in the Building: 1							
II.	BUILDING OWNER IN Mr./Mrs.: Paris Davis	FORMATION		57 S 12				
	Address of Owner: 30 Hup	po Road Ci	<sub>ty:</sub> Picayune	State: MS ZIP: 39466				
	Telephone Number: (601)3							
III.			D INFORMATION					
111.	ABATEMENT/RENOVATION CONTRACTOR INFORMATION							
	Name of Certified Lead Abatement/Renovator Firm: James Adams  Discontinuous Control of the PRP-00009925 To 1 to 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2							
	Firm Certification Number: PBR-00009925 Telephone Number: (504) 382-4578 Exp. Date: 1/27/2023 Address of Certified Firm: 419 Carolyn							
			Λ ,	70123				
	City: New Orleans	State:	-A	Zip Code: 70123				
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: "ASSUMED OR LEAD TEST SWAB"							
	Test Method Used & Manufacturer of Testing Equipment: Accomed on the Property of the National State of the Nat							
	For Paint Chip Analysis, Name of Laboratory: Certification Number:							
V.	GENERAL CONTRACTOR (Other)							
	Name of Firm: THE HOME DEPOT							
	Firm Mailing Address: 2455 PACES FERRY RD; C-11							
	Contact Person: DIRECTOR OF SERVICES COMPLIANCE Telephone Number: (770) 384-4422							
V/I	PROJECT DATES COMPLETE COMPLETE							
VI.	Lead Project Start: 10 /10 /2022 Lead Project Stop: 10 /10 /2022							
	Abatement/Renovation to							
	Abatement/Renovation to	o be done during what the	Night (8 p.m. − 5					
****	DESCRIPTION OF PD	OCEDUDES TO DE U						
VII.	DESCRIPTION OF PRODUCTION OF P							
	Wet Sanding	Component Removal	☐ Heat Gun☐ Negative Air	Encapsulation Enclosure				
	Containment Other - Explain RENC	Strip and Removal		ICES UNDER THE EPA'S				
	RRP F		LAD GALL WORK FRAGE	IOLO ONDER THE EL AO				

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

9 Replacment Windows

IX.	WASTE TRANSPORTER Name: N/A						
	Full Mailing Address:						
	City:						
	Contact:						
X.	WASTE LEAD DISPOSAL SITE Site Name: SEE ONSITE PERSONNEL						
	Physical Address:						
	Full Mailing Address:			jn	2000		
	City:						
XI.	DISPOSAL SITE FOR DEBRIS OTHER THAN LEAD Site Name:SEE ONSITE PERSONNEL						
	Physical Address:						
	Full Mailing Address:						
	City:	St	tate:	Zip Code:_			
	Contact Person:  NOTE: All debris (other than lead) sho	Telep	phone Number: (_	te, or to a pe	ermitted sanitary landfill		
XII.	ABATEMENT	8	1 797	,	14-		
	A certified supervisor is required for each during the post-abatement cleanup and compared conducted, the certified supervisor able to be present at the work site in no many conducted.	learance of worl	k areas. At all other or available by telepl	times when	abatement activities are		
XIII	.RENOVATION						
	A certified renovator is required for each are posted, while the required work area performed. The certified renovator must available either onsite or by telephone at	containment is it regularly direc	being established, and t work being perform	nd while required by other	uired work area cleaning is		
XIV	CERTIFICATION OF ACCURA	CY					
	I certify that all of the above information Print THE HOME DEPOT		THE HOME DEPOT		Date 09/27/2022		
	**************************************						
	Contact information for return mail or questions concerning the information on this Notice  Mailing Address: 2455 PACES FERRY RD; C11						
	City: ATLANTA		State: GA	Zi	p Code: 30339		
	Contact: DIRECTOR OF SERVICES C	Telephone Numl	her: (770 )	384-4422			
	Contact: DIRECTOR OF SERVICES COMPLIANCE Telephone Number: (770) 384-4422  Email: LEAD_PAINT@HOMEDEPOT.COM						
Refe	r to fee schedule to calculate required	notification fee	. Notification fee	must be sub	omitted with notification.		
MAI	L TO: Mississippi Department of En Lead Notifications	vironmental Q	uality				

P.O. Box 2261, Jackson, MS 39225