263840

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



| ИDEQ U ⊠Email | se Only: Mail Hand Delivery | Postmark (mail only) | Date Rec | 14-23 | Al Number | | |
|--|--|-----------------------|------------------|--------------|--|--|--|
| 7 | | 1 | | | 1960 | | |
| oject' | Type: Abatement | Renovation | Date of Buildin | Bayisian [| Cancellation Emergency | | |
| | heck if asbestos notificati | | | | CancenationEmergency | | |
| ease c | | | ted for this pro | Jeer. | | | |
| I. | PROJECT/SITE INFORMATION Target Housing: | | | | | | |
| | Child-Occupied Facility: | | | | | | |
| | Physical Address Project Site: 67 County Road 341 City: luka State: MS Zip Code: 38852 County: Tishomingo | | | | | | |
| | | | | Coun | ity: Honorming | | |
| | Number of Units to be Abated/Renovated in the Building: 23 | | | | | | |
| II. | BUILDING OWNER INFORMATION | | | | | | |
| | Mr./Mrs.: Ronnie or Tina Jo | | | | | | |
| | Address of Owner: 67 Coun | | City: luka | S | tate: MS ZIP: 38852 | | |
| | Telephone Number: (662) 424-3810 | | | | | | |
| III. ABATEMENT/RENOVATION CONTRACTOR INFORMATION | | | | | | | |
| | Name of Certified Lead Abatement/Renovator Firm: Andrew Tidwell | | | | | | |
| | Firm Certification Number: PBR-00008575 Telephone Number: (662) 316-1915 Exp. Date: 02/20/2024 | | | | | | |
| | Address of Certified Firm: 1571 CR 478 | | | | | | |
| | City: New Albany | St | ata: MS | 7 | ip Code: 38652 | | |
| | | | atc. | | ip code. | | |
| 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 CONTRAC | TOR (Other) | | | | | |
| | Name of Firm: Windows USA | | | | | | |
| | Firm Mailing Address: PO Box 222 Royal, AR 71968 | | | | | | |
| | Contact Person: Chrystal E | augher | Telep | hone Number: | (⁵⁰¹)287-4826 | | |
| V/I | PROJECT DATES | tion of Holdell Total | TYLE SEE | | | | |
| V 1. | | /03 /2023 | Lead Project | ct Stop: 07 | /05 /2023 | | |
| | Abatement/Renovation to be done during what time? Day (5 a.m. – 5 p.m.) Evening (5 p.m. – 8) | | | | | | |
| | | | | | .m.) Weekend | | |
| | | | | | 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | |
| VII. | DESCRIPTION OF PROCEDURES TO BE USED (CHECK ALL THAT APPLY) | | | | | | |
| | Wet Sanding | Component Remo | | leat Gun | Encapsulation | | |
| | Containment Other – Explain | Strip and Remova | 1 1. | legative Air | Enclosure | | |
| | Unier – Explain | | | | | | |

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

Retro Fit Pocket Replacement of Existing Windows with New Vinyl Windows

| | WASTE TRANSPORTER Name: Andrew Tidwell | | | _ | | | | |
|------|--|---|---|----|--|--|--|--|
| | Full Mailing Address: 1571 CR 478 | | | | | | | |
| | City: New Albany | State: MS | Zip Code: 38652 | | | | | |
| | Contact: Andrew Tidwell | Telephone Number: | : (⁶⁶²) 316-1915 | | | | | |
| | WASTE LEAD DISPOSAL SITE | | | | | | | |
| | Site Name: Republic Services Little Dixie Landfill | | | | | | | |
| | Physical Address: 1716 N. County Line | e Rd | | | | | | |
| | Full Mailing Address: | | | | | | | |
| | City: Ridgeland | State: MS | Zip Code: <u>39157</u> | | | | | |
| XI. | DISPOSAL SITE FOR DEBRIS OT | | | | | | | |
| | Site Name: | | | _ | | | | |
| | Physical Address: | | | | | | | |
| | Full Mailing Address: | | | _ | | | | |
| | City: | State: | Zip Code: | _ | | | | |
| | Contact Person: NOTE: All debris (other than lead) should | Telephone Numbe | er: () ish Site, or to a permitted sanitary landfill | • | | | | |
| | ABATEMENT | | | | | | | |
| | A certified supervisor is required for each a during the post-abatement cleanup and cleaning conducted, the certified supervisor shable to be present at the work site in no mo | arance of work areas. At all all be onsite or available by | other times when abatement activities are | | | | | |
| XIII | RENOVATION | | | | | | | |
| | A certified renovator is required for each reare posted, while the required work area coperformed. The certified renovator must reavailable either onsite or by telephone at all | ontainment is being establish egularly direct work being p | ed, and while required work area cleaning performed by other individuals and must bo | is | | | | |
| XIV | CERTIFICATION OF ACCURAC | Y | | | | | | |
| | I certify that all of the above information is | | | | | | | |
| | Print Andrew Tidwell | Signature Andrew | Date 06/16/2023 | | | | | |
| | Contact information for return mail or questions concerning the information on this Notice | | | | | | | |
| | Mailing Address: 1571 CR 478 | | | | | | | |
| | | | MS Zip Code: 38652 | | | | | |
| | Contact: Andrew Tidwell | Telephone 1 | Number: (662) 316-1915 | | | | | |
| | Email: andy.tidwell@windowsusa.com | n | | | | | | |
| Refe | r to fee schedule to calculate required no | tification fee. Notification | n fee must be submitted with notification | n. | | | | |
| MAI | L TO: Mississippi Department of Envi Lead Notifications P.O. Box 2261, Jackson, MS 39: | | | | | | | |