

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

204746



MDEQ U ⊠Email		Hand Delivery	Postmark (mail only)		Received 7-11-2023	AI Number	
Project '	Tyne:	Abatement	Renovation 1	ate of Build	ing Constru	ction: 1975	
Please ch	eck all ap	plicable boxes for	- Company of the Comp	on: Origin	nal Revision	n ☐Cancellation ☐Emergency	
I.	PROJEC Target Ho Child-Occ	CT/SITE INFOR	RMATION	Instell	HHIZ JAK		
			ite: 304 Glenn Stree		contract Chang	L. S. Karanasak, a., mar. 1991	
			State: MS				
	Number o	f Units to be Abate	ed/Renovated in the B	uilding: replaci	ng 16 window	S	
II.		NG OWNER IN Troy Grayer	FORMATION	SE REPORTE	in statism		
	Address o	f Owner: 304 Gler	n Street	_City: Crysta	Springs	State: MS ZIP: 39059	
	Telephone	Number: (601) 7	17-2732				
III.	ABATE	MENT/RENOV	ATION CONTRAC	TOR INFO	RMATION		
	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: 03/28/2024						
			126 Cape Charles	repriorie i van		Exp. Date	
	City: Bran		Sta	ite: MS		_ Zip Code: 39047	
unir n	The state of the s			Alberta seaso	No think to the	_ Zip code	
IV.		TION INFORM Renovator/Insp		Conducting	Inspection	adhires admitstral air prod harmathre amedians diffic	
		_		_		spection Conducted:	
			-			spection conducted	
			Name of Laboratory:				
v.		AL CONTRACT		L. person	Transporting	grafication of the graphic poly to the state of the state	
	Firm Mailing Address: PO Box 222, Royal, AR 71968						
		erson: Christine V			ephone Numb	per:(501)760-0292	
VI.		ect Start: 07	/17 /2023		Birth of t	/17 /2023	
	Abateme	nt/Renovation to	be done during wha			p.m.) Evening (5 p.m. – 5 a.m.) Weekend	
VII.	DESCRI	PTION OF PRO	OCEDURES TO BI	E USED (CH	IECK ALL	ΓHAT APPLY)	
May s	Wet S Conta	anding [inment _	Component Removal Strip and Removal	/al	Heat Gun Negative Ai	Encapsulation	

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

Replacing 16 windows

	Full Mailing Address: 126 Cape Charles	E I LO AL COMPA	mers in transmit to all the					
			Zip Code: 39047					
	Contact: Gary Ogle	Telephone Number						
•	WASTE LEAD DISPOSAL SITE Site Name: Canton Sanitary Landfill	901						
	Physical Address: 303 Soldiers Colony F	Road	the colored period and leading to					
	Full Mailing Address:							
	City: Canton	State: MS	Zip Code: 39046					
	DISPOSAL SITE FOR DEBRIS OTHER THAN LEAD Site Name:							
	Physical Address:	31 - W 3						
	Full Mailing Address:							
	City:	State:	Zip Code:					
Π.	Contact Person: NOTE: All debris (other than lead) should g ABATEMENT A certified supervisor is required for each aba	Telephone Number go to an authorized Rubbin atement project and shall be	r: ()sh Site, or to a permitted sanitary landfill.					
II.	Contact Person:NOTE: All debris (other than lead) should g ABATEMENT	Telephone Number go to an authorized Rubbin atement project and shall be the consite or available by the consiste or available by the consistency or available by the consis	r: ()sh Site, or to a permitted sanitary landfill. be onsite during all work site preparation and other times when abatement activities are					
II.	Contact Person: NOTE: All debris (other than lead) should g ABATEMENT A certified supervisor is required for each abaduring the post-abatement cleanup and clearabeing conducted, the certified supervisor shall	Telephone Number go to an authorized Rubbin atement project and shall be the consite or available by the consiste or available by the consistency or available by the consis	r: ()sh Site, or to a permitted sanitary landfill. be onsite during all work site preparation and other times when abatement activities are					
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II. III.	Contact Person: NOTE: All debris (other than lead) should g ABATEMENT A certified supervisor is required for each aba during the post-abatement cleanup and cleara being conducted, the certified supervisor shall able to be present at the work site in no more of RENOVATION A certified renovator is required for each renovate posted, while the required work area contaperformed. The certified renovator must regu	Telephone Number go to an authorized Rubbin atement project and shall be the consite or available by the consite of available by the consistency of a	r: ()					
II.	Contact Person: NOTE: All debris (other than lead) should generated and should generated and should generated and should generated and supervisor is required for each abadduring the post-abatement cleanup and clearabeing conducted, the certified supervisor shall able to be present at the work site in no more senerated and should be present at the work site in no more senerated and should be present at the work and some senerated are posted, while the required work area contaperformed. The certified renovator must regulated be sither onsite or by telephone at all the CERTIFICATION OF ACCURACY I certify that all of the above information is contable senerated and should be should	Telephone Number of to an authorized Rubbin atement project and shall be ince of work areas. At all the onsite or available by than 2 hours. Divation project and shall be ainment is being established alarly direct work being permes renovations are being trect.	che onsite during all work site preparation and other times when abatement activities are selephone, pager, or answering service, and e physically present when the required signs and while required work area cleaning is erformed by other individuals and must be conducted.					
III.	Contact Person: NOTE: All debris (other than lead) should generated and should generated and should generated and should generated and supervisor is required for each abadduring the post-abatement cleanup and clearabeing conducted, the certified supervisor shall able to be present at the work site in no more senerated and should be present at the work site in no more senerated and should be present at the work and some senerated are posted, while the required work area contaperformed. The certified renovator must regulated be sither onsite or by telephone at all the CERTIFICATION OF ACCURACY I certify that all of the above information is contable senerated and should be should	Telephone Number go to an authorized Rubbin atement project and shall be ince of work areas. At all the onsite or available by than 2 hours. Divation project and shall be ainment is being established alarly direct work being permes renovations are being	r: ()					
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Lead Notifications

P.O. Box 2261, Jackson, MS 39225