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

206469

MDEQ Use Only: ☒Email ☐Mail ☐Hand Delivery	Postmark (mail only)	Date Received 08-18-2023	AI Number

Project Type: ☐ Abatement ☑ Renovation **Date of Building Construction:** 1970

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: 516 Queens Park Cir

City: Jackson   State: MS   Zip Code: 39209   County: Hinds

Number of Units to be Abated/Renovated in the Building: Replacing 12 Windows

II. BUILDING OWNER INFORMATION
Mr./Mrs.: Diane Mims

Address of Owner: 516 Queens Park Cir   City: Jackson   State: MS   ZIP: 39209

Telephone Number: (601) 317-6677

III. 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

Address of Certified Firm: 126 Cape Charles

City: Brandon   State: MS   Zip Code: 39047

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 CONTRACTOR (Other)
Name of Firm: Windows USA

Firm Mailing Address: PO Box 222, Royal, AR 71968

Contact Person: Christine Walker   Telephone Number: (501) 760-0292

VI. PROJECT DATES
Lead Project Start: 08 / 24 / 2023   Lead Project Stop: 08 / 25 / 2023

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

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: Gary Ogle

Full Mailing Address: 126 Cape Charles

City: Brandon   State: MS   Zip Code: 39047

Contact: Gary Ogle   Telephone Number: (601) 862-8033

X. WASTE LEAD DISPOSAL SITE

Site Name: Canton Sanitary Landfill

Physical Address: 303 Soldiers Colony Road

Full Mailing Address:

City: Canton   State: MS   Zip Code: 39046

XI. DISPOSAL SITE FOR DEBRIS OTHER THAN LEAD

Site Name:

Physical Address:

Full Mailing Address:

City: State: Zip Code:

Contact Person: Telephone Number: (   )

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 Gary Ogle   Signature _Gary Ogle_   Date 8/18/2023

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

Mailing Address: 126 Cape Charles

City: Brandon   State: MS   Zip Code: 39047

Contact: Gary Ogle   Telephone Number: (601) 862-8033

Email: gary.ogle@windowsusa.com

Refer to fee schedule to calculate required notification fee. Notification fee must be submitted with notification.

EMAIL TO: notifications@mdeq.ms.gov   **MAIL COPY TO:** **Mississippi Department of Environmental Quality**
Lead Notifications
P.O. Box 2261, Jackson, MS 39225