

# Mississippi Office of Pollution Control

## Lead-Based Paint Abatement/Renovation Notification



<b>MDEQ Use Only:</b> <input checked="" type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery	<b>Postmark (mail only)</b> _____	<b>Date Received</b> 4/12/2024
		<b>AI Number</b> _____

**Project Type:**    Abatement    Renovation      **Date of Building Construction:** 1965

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:** 3551 OLD BAY SPRINGS ROAD

City: LAUREL      State: MS      Zip Code: 39440      County: JONES

Number of Units to be Abated/Renovated in the Building: ONE

### II. BUILDING OWNER INFORMATION

Mr./Mrs.: JONATHAN AND ALISON REDDING

Address of Owner: SAME      City: \_\_\_\_\_      State: \_\_\_\_\_      ZIP: \_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_

### III. ABATEMENT/RENOVATION CONTRACTOR INFORMATION

**Name of Certified Lead Abatement/Renovator Firm:** NORMAN CONSTRUCTION

Firm Certification Number: NBF-00000639      Telephone Number: (601) 264-7114      Exp. Date: 2/28/2025 2/25/2024

Address of Certified Firm: 788 RICHBURG ROAD

City: HATTIESBURG      State: MS      Zip Code: 39402

### IV. INSPECTION INFORMATION

**Name of Renovator/Inspector/Risk Assessor Conducting Inspection:** DAVE BINGHAM

Certification Number: PBI-00003690      Exp. Date: 3/31/2025      Date Inspection Conducted: 4/4/2024

Test Method Used & Manufacturer of Testing Equipment: NIGHTONEXLP300A

For Paint Chip Analysis, Name of Laboratory: MICROMETHODS LAB      Certification Number: PBF0000028

### V. GENERAL CONTRACTOR (Other)

Name of Firm: NORMAN CONSTRUCTION

Firm Mailing Address: SAME

Contact Person: BEN BARNES      Telephone Number: (601) 264-7114

### VI. PROJECT DATES

Lead Project Start: 5 / 3 / 2024      Lead Project Stop: 6 / 24 / 2024

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)

- |   |  |                                       |  |
|---|--|---------------------------------------|--|
| <input type="checkbox"/> Wet Sanding            | <input type="checkbox"/> Component Removal | <input type="checkbox"/> Heat Gun     | <input type="checkbox"/> Encapsulation |
| <input checked="" type="checkbox"/> Containment | <input type="checkbox"/> Strip and Removal | <input type="checkbox"/> Negative Air | <input type="checkbox"/> Enclosure     |
| <input type="checkbox"/> Other – Explain        |  |                                       |  |

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

REMOVE EXISTING SIDING AND REMOVE EXISTING INTERIOR DOORS

**IX. WASTE TRANSPORTER**

Name: ALL PRO DISPOSAL  
Full Mailing Address: PO BOX 17563  
City: HATTIESBURG State: MS Zip Code: 39402  
Contact: KYLE COOK Telephone Number: (601) 550-0616

**X. WASTE LEAD DISPOSAL SITE**

Site Name: RANDY DANNY INC  
Physical Address: 184 IRA G ODOM ROAD  
Full Mailing Address: SAME  
City: ELLISVILLE State: MS Zip Code: 39437

**XI. DISPOSAL SITE FOR DEBRIS OTHER THAN LEAD**

Site Name: SAME  
Physical Address: \_\_\_\_\_  
Full Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Contact Person: RANDY DANNY Telephone Number: ( )

NOTE: All debris (other than lead) should go to an authorized Rubbish Site, or to a permitted sanitary landfill.

**XII. ABATEMENT**

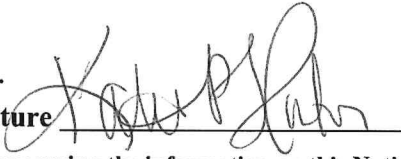
A certified supervisor is required for each abatement project and shall be onsite during all work site preparation and during the post-abatement cleanup and clearance of work areas. At all other times when abatement activities are being conducted, the certified supervisor shall be onsite or available 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 KATIE P HINTON Signature  Date 4/11/2024

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

Mailing Address: PO BOX 15399  
City: HATTIESBURG State: MS Zip Code: 39404  
Contact: BEN BARNES Telephone Number: (601) 264-7114  
Email: BEN@NORMANCONSTRUCTION.NET

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

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