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





MDEQ U Email	O Use Only:  ail Mail Hand Delivery Postmark (mail only)	Date Received 10/18/2024	AI Number			
roject	et Type: Abatement Renovation Date of B	uilding Construction	ı: <u>1975</u>			
lease cl lease c	check all applicable boxes for the type of Notification: Ocheck if asbestos notification was also submitted for the	riginal Revision [] is project: []	Cancellation Emergency			
I.	PROJECT/SITE INFORMATION Target Housing: Child-Occupied Facility:		- A			
	Physical Address Project Site: 10330 Country Ln  City: Philadelphia State: MS Zip Code: 39350 County: Neshoba					
	Number of Units to be Abated/Renovated in the Building: replacing 18 windows					
II.	BUILDING OWNER INFORMATION  Mr./Mrs.: Rhonda Davis					
	Address of Owner: 10330 Country Ln City: Ph	iladelphia Sta	te: MS ZIP: 39350			
III.	. ABATEMENT/RENOVATION CONTRACTOR IN					
	Name of Certified Lead Abatement/Renovator Firm: Michael Arender					
	Firm Certification Number: PBR-00012789 Telephone	Number:(662)590-84	40 Exp. Date: 05/07/2025			
	Address of Certified Firm: 54 Spears Rd					
	City: Yazoo City State: MS	Zip	Code: 39194			
IV.	INSPECTION INFORMATION					
	Name of Renovator/Inspector/Risk Assessor Conducting Inspection:					
	Certification Number: Exp. Date: Date Inspection Conducted:  Test Method Head & Manufacturer of Testing Equipment:					
	Test Method Used & Manufacturer of Testing Equipment:  For Paint Chip Analysis, Name of Laboratory:  Certification Number:					
V.	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 Stop: 11 /	01 /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.	I. DESCRIPTION OF PROCEDURES TO BE USED	(CHECK ALL THA	T APPLY)			
	<ul> <li>Wet Sanding</li> <li>□ Component Removal</li> <li>□ Strip and Removal</li> <li>□ Other – Explain</li> </ul>	Heat Gun Negative Air	Encapsulation Enclosure			

## 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: Michael Arender							
	Full Mailing Address: 54 Spears Rd							
	City: Yazoo City	Stata: MS	7in I	Cada: 39194				
	Contact: Michael Arender	Telephone Numbe	Zip ( r: ( <sup>662</sup> ) 59	90-8440				
X.	WASTE LEAD DISPOSAL SITE				,			
	Site Name: Canton Sanitary Landfill				ř.			
	Physical Address: 303 Soldiers Colony	Rd						
	Full Mailing Address:			No.				
	City: Canton			Code: 39046	-			
XI.	DISPOSAL SITE FOR DEBRIS OTH							
	Site Name:							
	Physical Address:				<del></del>			
	Full Mailing Address:							
	City:							
	Contact Person:  NOTE: All debris (other than lead) should a							
	NOTE: All debris (other than lead) should	go to an authorized Rubb	oish Site, or	to a permitted sanitar	y 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 renare posted, while the required work area cont performed. The certified renovator must regavailable either onsite or by telephone at all times.	tainment is being establish ularly direct work being p	ed, and whoerformed b	ile required work area by other individuals and	cleaning is			
XIV	CERTIFICATION OF ACCURACY							
	I certify that all of the above information is correct.  Print Michael Arender  Signature (Machael Machael Date 10/18/202)							
	Contact information for return mail or questions concerning the information on this Notice							
	Mailing Address: 54 Spears Rd							
	City: Yazoo City	State:	MS	Zip Code: 39194	1			
	Contact: Michael Arender			662)590-8440				
	Email: michael.arender@windowsus	a.com						
Refe	r to fee schedule to calculate required notif	fication fee. Notification	n fee must	be submitted with no	otification			
MAI	L.TO: Mississippi Department of Enviro	onmental Quality						

**Lead Notifications** 

P.O. Box 2261, Jackson, MS 39225