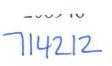
Mississippi Office of Pollution Control Lead-Based Paint Abatement/Renovation Notification





se Only:		Postmark (mail	only)	Date Received	AI	Number			
Mail	Hand Delivery			10-30-2	024				
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Physical			th Polk St			(1/4			
City: Cori	nth	State: MS	Zin	Code: 38834	County: A	lcorn			
Number o	f Units to be Abat	ed/Renovated in	the Building	Replacing 13					
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			City:	Commun	State:_	M2 ZIb: 300)4		
Telephone	Number: $(\frac{662}{2})^2$	284-2159							
ABATE	MENT/RENOV	ATION CON	TRACTOR	INFORMATIO	ON				
ABATEMENT/RENOVATION CONTRACTOR INFORMATION Name of Certified Lead Abatement/Renovator Firm: Trey Barkley									
						Exp. Date: 04/	30/2025		
					-/	54.1			
	Albany		State: MS		Zin C	ode: 38652			
			State		Zip C	ouc			
INSPECTION INFORMATION									
7 2									
For Paint Chip Analysis, Name of Laboratory: Certification Number:									
GENER	AL CONTRAC	TOR (Other)							
						do: G4			
Firm Ma	iling Address: PC	O Box 222 Roy	/al, AR 71968						
Contact I	Person Christine	Walker		Telephone N	umber:(501	760-0292			
Comact	V15011.				And the second s	×			
Lead Pro		/13 /2024		ad Project Stop					
Lead Pro				-		/ <u>2024</u> Evening (5 p	o.m. – 8		
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	Type: Ineck all appleck if as PROJEC Target Ho Child-Occ Physical A City: Cori Number of BUILDID Mr./Mrs.: Address of Telephone ABATEM Name of Firm Cert Address of City: New INSPEC Name of Certificate Test Method Test Method For Paint GENER Name of Firm Main of Firm Main Main Main Main Main Main Main Main	Type: Abatement heck all applicable boxes for heck if asbestos notification PROJECT/SITE INFORTATION Target Housing: Child-Occupied Facility: Physical Address Project States City: Corinth Number of Units to be Abate BUILDING OWNER IN Mr./Mrs.: Russell Messn Address of Owner: 3371 Natelephone Number: (662) 2 ABATEMENT/RENOV Name of Certified Lead Firm Certification Number Address of Certified Firm City: New Albany INSPECTION INFORM Name of Renovator/Inspectification Number: Test Method Used & Man For Paint Chip Analysis, GENERAL CONTRAC Name of Firm: Windows Used Firm Mailing Address: Power Point Program	Type: Abatement Renovation neck all applicable boxes for the type of Notheck if asbestos notification was also supported to the second process of the type of Notheck if asbestos notification was also supported to the second process of the type of Notheck if asbestos notification was also supported to the second process of the type of Notheck if asbestos notification was also supported to the second process of the type of Notheck if asbestos notification was also supported to the second process of the type of Notheck if asbestos notification in the type	Type: Abatement Renovation Date of neck all applicable boxes for the type of Notification: heck if asbestos notification was also submitted for PROJECT/SITE INFORMATION Target Housing: Ohld-Occupied Facility: Physical Address Project Site: 3371 North Polk St City: Corinth State: MS Zip Number of Units to be Abated/Renovated in the Building: BUILDING OWNER INFORMATION Mr./Mrs.: Russell Messner Address of Owner: 3371 North Polk St City: Telephone Number: (662) 284-2159 ABATEMENT/RENOVATION CONTRACTOR Name of Certified Lead Abatement/Renovator Fir Firm Certification Number: PBR-00011864 Telephor Address of Certified Firm: 1157 CR 77 City: New Albany State: MS INSPECTION INFORMATION Name of Renovator/Inspector/Risk Assessor Cond Certification Number: Exp. Date: Exp. Date: Exp. Date: Test Method Used & Manufacturer of Testing Equipt For Paint Chip Analysis, Name of Laboratory: GENERAL CONTRACTOR (Other) Name of Firm: Windows USA Firm Mailing Address: PO Box 222 Royal, AR 71968	Type: Abatement Renovation Date of Building Constack all applicable boxes for the type of Notification: Original Reveleck if asbestos notification was also submitted for this project: PROJECT/SITE INFORMATION Target Housing: Service Site: 3371 North Polk St City: Corinth State: MS Zip Code: 38834 Number of Units to be Abated/Renovated in the Building: Replacing 13 BUILDING OWNER INFORMATION Mr./Mrs.: Russell Messner Address of Owner: 3371 North Polk St Telephone Number: (662) 284-2159 ABATEMENT/RENOVATION CONTRACTOR INFORMATION Name of Certified Lead Abatement/Renovator Firm: Trey Barkley Firm Certification Number: PBR-00011864 Telephone Number: (662) Address of Certified Firm: 1157 CR 77 City: New Albany State: MS INSPECTION INFORMATION Name of Renovator/Inspector/Risk Assessor Conducting Inspect Certification Number: Exp. Date: Date Test Method Used & Manufacturer of Testing Equipment: For Paint Chip Analysis, Name of Laboratory: Certification Certification Used GENERAL CONTRACTOR (Other) Name of Firm: Windows USA Firm Mailing Address: PO Box 222 Royal, AR 71968	Type: Abatement Renovation Date of Building Construction: Abatement Renovation Date of Building Construction: Abatement Renovation Date of Building Construction: Abatement Renovation: Doriginal Revision Carheck if asbestos notification was also submitted for this project: PROJECT/SITE INFORMATION Target Housing: Physical Address Project Site: 3371 North Polk St City: Corinth State: MS Zip Code: 38834 County: Abatement of Units to be Abated/Renovated in the Building: Replacing 13 Windows BUILDING OWNER INFORMATION Mr./Mrs.: Russell Messner Address of Owner: 3371 North Polk St Telephone Number: (662) 284-2159 ABATEMENT/RENOVATION CONTRACTOR INFORMATION Name of Certified Lead Abatement/Renovator Firm: Trey Barkley Firm Certification Number: PBR-00011864 Telephone Number: (662) 598-5455 Address of Certified Firm: 1157 CR 77 City: New Albany State: MS Zip County: New Albany State: Date: Date Inspection: Certification Number: Exp. Date: Date Inspection: Test Method Used & Manufacturer of Testing Equipment: For Paint Chip Analysis, Name of Laboratory: Certification Number of Firm: Windows USA Firm Mailing Address: PO Box 222 Royal, AR 71968	Type: Abatement Renovation Date of Building Construction: 1972 Reck all applicable boxes for the type of Notification: Original Revision Cancellation Eme		

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: Trey Barkley				E.vilne				
	Full Mailing Address: 1158 CR 77				stre				
	City: New Albany	State: MS	Zin C	ode: 38652					
	Contact: Trey Barkley	_ Telephone Number	: (<u>662</u>) <u>598</u>	8-5455					
X.	WASTE LEAD DISPOSAL SITE								
	Site Name: The Faircloth Rubbish Landfill								
	Physical Address: 1312 Springridge Rd								
	Full Mailing Address:								
	City: Clinton								
XI.	DISPOSAL SITE FOR DEBRIS OTHE	R THAN LEAD							
	Site Name:		. WAR						
	Physical Address:								
	Full Mailing Address:								
	City:								
	Contact Person:	Telephone Number	er: ()						
	NOTE: All debris (other than lead) should go to an authorized Rubbish Site, or to a permitted sanitary landfill.								
VIII	A certified supervisor is required for each abate during the post-abatement cleanup and clearance being conducted, the certified supervisor shall be able to be present at the work site in no more the certified supervisor.	ce of work areas. At all e onsite or available by	other times	when abateme	nt activities are				
ЛШ	A certified renovator is required for each renov	ation project and shall	he nhysicall	v nresent when	the required signs				
VIV	are posted, while the required work area contain performed. The certified renovator must regular available either onsite or by telephone at all time. CERTIFICATION OF ACCURACY	nment is being establish arly direct work being p	ed, and whi erformed b	le required wo y other individ	rk area cleaning is				
ΛIV	I certify that all of the above information is corn	ect.	1	2					
		gnature //	ayle	Date	e 10/30/2024				
	Contact information for return mail or question	ns concerning the inform	nation on th	is Notice	viti: servic				
	Mailing Address: 1158 CR 77								
	City: New Albany	State: N	ИS	Zip Code:	38652				
	Contact: Trey Barkley	Telephone	Number: (662 ₎ 598-545	55				
	Email: trey.barkley@windowsusa.com								
Refe	r to fee schedule to calculate required notific	ation fee. Notification	n fee must	be submitted	with notification.				
	IL TO: Mississippi Department of Environ								
MA	Lead Notifications	mental Quanty							

P.O. Box 2261, Jackson, MS 39225