649449

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



MDEQ U		Hand Delivery	Postmark (mail o	only)	Date Received 02-23-	2024	AI Numbe	er	
Please ch	neck all appli	icable boxes f	Renovation or the type of Not tion was also su	ification: 🔳	Original R	evision 🗌		tion Emergency	
I.	PROJECT/SITE INFORMATION Target Housing: Child-Occupied Facility: Physical Address Project Site: 705 Ruby Washington St City: Leland State: MS Zip Code: 38756 County: Washington								
							y: Washin	igton	
	Number of U	Inits to be Aba	ated/Renovated in	the Building:	Replacing 9 W	indows			
II.	BUILDING OWNER INFORMATION								
	Mr./Mrs.: Antonio Watson Address of Owner: 705 Ruby Washington St City: Lelan State: MS ZIP: 38756								
		Owner: 705 Rt Number: (⁶⁶²)		City:_	Leian	Sta	ate: MS	_ZIP: 38/56	
	Telephone N	lumber: (002)	009-3019	· · · · · · · · · · · · · · · · · · ·					
III.		ABATEMENT/RENOVATION CONTRACTOR INFORMATION							
	Name of Certified Lead Abatement/Renovator Firm: Kevin Armstrong								
	Firm Certification Number: PBR-00012238 Telephone Number: (501) 318-7783 Exp. Date: 07/05/2024								
			n: 22201 Vance F						
	City: Lonsd	ale		_ State: AR		Zi _]	p Code: 7	2087	
IV.	INSPECTION INFORMATION								
	Name of Renovator/Inspector/Risk Assessor Conducting Inspection:								
	Certificatio	n Number:	E	xp. Date:	D	ate Inspec	tion Con	ducted:	
	Test Method Used & Manufacturer of Testing Equipment:								
	For Paint Chip Analysis, Name of Laboratory: Certification Number:								
V.	GENERAI	L CONTRAC	CTOR (Other)						
17.12	Name of Fi	rm: Windows	USA						
	Firm Mailing Address: PO Box 222 Royal, AR 71968								
		son: Christine			_ Telephone	Number:(501) 760-	0292	
VI.	PROJECT Lead Project		/27 /2024	Lea	ad Project Sto			_	
	Abatement/	Renovation	to be done during			n. – 5 p.m	.) <u>E</u>	vening (5 p.m. – 8 p.m Veekend	
VII.	DESCRIPT	TION OF PE	ROCEDURES T	O BE USEI	CHECK A	ALL THA	T APPL	LY) —	
	Wet San Contain Other	nding ment	Component R Strip and Ren	emoval	Heat G	un	□ E	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		st at							
	Name: Kevin Armstrong									
	Full Mailing Address: 22201 Vance Road									
	City: Lonsdale	State: AR	Zip Code: 72087							
	Contact: Kevin Armstrong	Telephone Number: (501) 318-7783								
X.	WASTE LEAD DISPOSAL SITE Site Name: The Faircloth Rubbish Landfill									
	Physical Address: 1312 Springridge Road		,							
	Full Mailing Address:									
	City: Clinton	State: MS	Zip Code:							
XI.	DISPOSAL SITE FOR DEBRIS OTHER									
	Site Name:									
	Physical Address:									
	Full Mailing Address:									
	City:									
	Contact Person:	Telephone Numbe	r: ()							
	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 abatenduring the post-abatement cleanup and clearance being conducted, the certified supervisor shall be able to be present at the work site in no more that	e of work areas. At all o onsite or available by t	other times when abatement activities are							
XIII	.RENOVATION									
	A certified renovator is required for each renova are posted, while the required work area contain performed. The certified renovator must regular available either onsite or by telephone at all times	ment is being establishe rly direct work being pe	ed, and while required work area cleaning is erformed by other individuals and must be							
XIV	CERTIFICATION OF ACCURACY		ŕ							
	I certify that all of the above information is corre	ect. /								
	Print Kevin Armstrong Sign	nature Aum	My Date 02/23/2024							
	Contact information for return mail or questions concerning the information on this Notice Mailing Address: 22201 Vance Road									
	City: Lonsdale	State: A	R Zip Code: 72087							
	Contact: Kevin Armstrong		Jumber: (501) 318-7783							
	Email: kevin.armstrong@windowsusa.com									
	r to fee schedule to calculate required notifica		tee must be submitted with notification.							
MAI	L TO: Mississippi Department of Environm	ental Quality								

P.O. Box 2261, Jackson, MS 39225