



**VIII. DESCRIPTION OF RENOVATION ACTIVITIES TO BE COMPLETED (INCLUDING COMPONENTS TO BE AFFECTED)**  
REMOVING 1 WINDOWS CONTAIN LEAD PAINT  
INSTALLATION OF 1 VINYL WINDOWS

**IX. WASTE TRANSPORTER**

Name: CORY PHILLIPS  
Full Mailing Address: 134 LINCOLN RD  
City: COLUMBUS State: MS Zip Code: 39705  
Contact: CHRIS COLLINS Telephone Number: (662) 842-5201

**X. WASTE LEAD DISPOSAL SITE**

Site Name: WINDOW WORLD OF TUPELO/COLUMBUS  
Physical Address: 134 LINCOLN RD  
Full Mailing Address: 134 LINCOLN RD  
City: COLUMBUS State: MS Zip Code: 39750

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

Site Name: WINDOW WORLD OF TUPELO/COLUMBUS  
Physical Address: 134 LINCOLN RD, COLUMBUS, MS 39705  
Full Mailing Address: 134 LINCOLN RD  
City: COLUMBUS State: MS Zip Code: 39705  
Contact Person: CHRIS COLLINS Telephone Number: (662) 842-5201

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 Chris Collins Signature [Signature] Date 11/21/24

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

Mailing Address: 4979 CLIFF GOODEN BLVD  
City: Tupelo State: MS Zip Code: 38801  
Contact: Ashley Telephone Number: (662) 434-4026  
Email: Ashley@tupelodown.com

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