

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

727174



MDEQ Use Only: <input checked="" type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery	Postmark (mail only)	Date Received 12/19/2024	AI Number
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**Project Type:**  Abatement    Renovation      **Date of Building Construction:** 1960  
 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:** 39 Concourse Rd  
 City: Columbus      State: MS      Zip Code: 39702      County: Lowndes  
 Number of Units to be Abated/Renovated in the Building: replacing 17 windows

**II. BUILDING OWNER INFORMATION**

Mr./Mrs.: Roger James  
 Address of Owner: 39 Concourse Rd      City: Columbus      State: MS      ZIP: 39702  
 Telephone Number: (662) 386-0064

**III. ABATEMENT/RENOVATION CONTRACTOR INFORMATION**

**Name of Certified Lead Abatement/Renovator Firm:** Andy Tidwell  
 Firm Certification Number: PBR-00008575      Telephone Number: (662) 316-1915      Exp. Date: 12/19/2025  
 Address of Certified Firm: 1571 CR 478  
 City: New Albany      State: MS      Zip Code: 38652

**IV. INSPECTION INFORMATION**

**Name of Renovator/Inspector/Risk Assessor Conducting Inspection:** \_\_\_\_\_  
 Certification Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Date Inspection Conducted: \_\_\_\_\_  
 Test Method Used & Manufacturer of Testing Equipment: \_\_\_\_\_  
 For Paint Chip Analysis, Name of Laboratory: \_\_\_\_\_ Certification Number: \_\_\_\_\_

**V. GENERAL CONTRACTOR (Other)**

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 DATES**

Lead Project Start: 01 /08 /2025      Lead Project Stop: 01 /09 /2025  
 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)**

Wet Sanding       Component Removal       Heat Gun       Encapsulation  
 Containment       Strip and Removal       Negative Air       Enclosure  
 Other – Explain

**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: Andrew Tidwell

Full Mailing Address: 1571 CR 478

City: New Albany State: MS Zip Code: 38652

Contact: Andrew Tidwell Telephone Number: (662) 316-1915

**X. WASTE LEAD DISPOSAL SITE**

Site Name: Republic Services Little Dixie Landfill

Physical Address: 1716 N. County Line Rd

Full Mailing Address: \_\_\_\_\_

City: Ridgeland State: MS Zip Code: 39157

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

Site Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Full Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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 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 Andrew Tidwell

Signature 

Date 12/19/2024

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

Mailing Address: 1571 CR 478

City: New Albany State: MS Zip Code: 38652

Contact: Andrew Tidwell Telephone Number: (662) 316-1915

Email: andy.tidwell@windowsusa.com

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

MAIL TO: Mississippi Department of Environmental Quality  
Lead Notifications  
P.O. Box 2261, Jackson, MS 39225