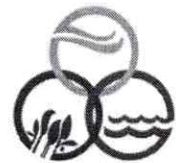


# Mississippi Office of Pollution Control Lead-Based Paint Abatement/Renovation Notification

741183



MDEQ Use Only: <input checked="" type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery	Postmark (mail only)	Date Received 1/20/2024	AI Number
--	----------------------	----------------------------	-----------

Project Type:  Abatement    Renovation   Date of Building Construction: 1965

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: 806 Spruce St

City: Columbus   State: MS   Zip Code: 39702   County: Lowndes

Number of Units to be Abated/Renovated in the Building: replacing 14 windows

## II. BUILDING OWNER INFORMATION

Mr./Mrs.: Heather Gilkey

Address of Owner: 806 Spruce St   City: Columbus   State: MS   ZIP: 39702

Telephone Number: (662) 364-3612

## III. ABATEMENT/RENOVATION CONTRACTOR INFORMATION

Name of Certified Lead Abatement/Renovator Firm: Dustin Hill

Firm Certification Number: NBF-00000889   Telephone Number: (662) 659-9524   Exp. Date: 12/31/2025

Address of Certified Firm: 1077 County Rd 66

City: Myrtle   State: MS   Zip Code: 38650

## IV. INSPECTION INFORMATION

Name of Renovator/Inspector/Risk Assessor Conducting Inspection: Dustin Hill

Certification Number: NBF-00000889   Exp. Date: 12/19/2024   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 /27 /2025   Lead Project Stop: 01 /27 /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)

- |   |  |                                       |  |
|---|--|---------------------------------------|--|
| <input type="checkbox"/> Wet Sanding            | <input type="checkbox"/> Component Removal | <input type="checkbox"/> Heat Gun     | <input type="checkbox"/> Encapsulation |
| <input checked="" type="checkbox"/> Containment | <input type="checkbox"/> Strip and Removal | <input type="checkbox"/> Negative Air | <input type="checkbox"/> Enclosure     |
| <input type="checkbox"/> 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: Dustin Hill  
Full Mailing Address: 1077 County Rd 66  
City: Myrtle State: MS Zip Code: 38650  
Contact: Dustin Hill Telephone Number: (662) 659-9524

**X. WASTE LEAD DISPOSAL SITE**

Site Name: Republic Service 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 Dustin Hill Signature Dustin Hill Date 01/20/2025

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

Mailing Address: 1077 County Rd 66  
City: Myrtle State: MS Zip Code: 38650  
Contact: Dustin Hill Telephone Number: (662) 659-9524  
Email: dustin.hill@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