

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

752039



MDEQ Use Only: <input checked="" type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery	Postmark (mail only)	Date Received 2/12/2025	AI Number
----------------------------------------------------------------------------------------------------------------------------------	----------------------	----------------------------	-----------

Project Type: Abatement Renovation Date of Building Construction: 1969
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: 108 Magnolia St
City: Flora State: MS Zip Code: 39071 County: Madison
Number of Units to be Abated/Renovated in the Building: Replacing 8 Windows

II. BUILDING OWNER INFORMATION

Mr./Mrs.: Robert Smith
Address of Owner: 108 Magnolia St City: Flora State: MS ZIP: 39071
Telephone Number: (601) 594-3147

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: 07/05/2025
Address of Certified Firm: 22201 Vance Road
City: Lonsdale State: AR Zip Code: 72087

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: 02 / 21 / 2025 Lead Project Stop: 02 / 21 / 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)

Like for Like Window Replacement

IX. WASTE TRANSPORTER

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 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 Kevin Armstrong Signature Kevin Armstrong Date 02/12/2025

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

Mailing Address: 22201 Vance Road
City: Lonsdale State: AR Zip Code: 72087
Contact: Kevin Armstrong Telephone Number: (501) 318-7783
Email: kevin.armstrong@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