208767

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



MDEQ U: ⊠Email		☐Hand Delivery	Postmark (mail only)		Date Received 4/10/2025	AIN	umber
lease ch	eck all ap	plicable boxes for	Renovation the type of Notific on was also subm	ation: 🔳	Original 🔲 Revis	ion []Canc	ellation Emergency
	PROJECT/SITE INFORMATION Target Housing: Child-Occupied Facility: Physical Address Project Site: 191 County Road 1250						
	City: Boo	neville	State: MS	Zip			entiss
	Number o	of Units to be Abate	ed/Renovated in the	Building:	replacing 10 windo	ows	
II.	Mr./Mrs.:	NG OWNER IN Tracey Hendersor	1				
	Address of Telephone	of Owner: 191 Cou e Number: (662)6	nty Road 1250 3-5587	City:_ 	Booneville	State: <u>N</u>	IS ZIP: 38829
III.	ABATEMENT/RENOVATION CONTRACTOR INFORMATION						
	Name of Certified Lead Abatement/Renovator Firm: Andy Tidwell						
	Firm Certification Number: NBF-00000886 Telephone Number: (662) 316-1915 Exp. Date: 12/19/2025						
	Address	of Certified Firm	1571 CR 478				
	City: Nev	v Albany		State: MS		Zip Co	de: 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 Pain	t Chip Analysis, 1	Name of Laborator	y:	Certifi	cation Nun	nber:
V.	GENER	AL CONTRAC	TOR (Other)				
• •	Name of Firm: Windows USA						
	Firm Mailing Address: PO Box 222 Royal, AR 71968						
		Person: Christine \		•	Telephone Nu	mber:(⁵⁰¹)	760-0292
VI.	PROJE	CT DATES oject Start: 04		Lea	ad Project Stop:		
				hat time?	Day (5 a.m Night (8 p.m.	_	Evening (5 p.m. – 8 p.m. – Weekend
VII.	DESCR	IPTION OF PRO	OCEDURES TO	BE USE) (CHECK AL	L THAT A	PPLY)
, 221	Wet S	Sanding [ainment [r - Explain	Component Ren	noval	Heat Gun Negative		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								
	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:								
	Contact Person: Telephone Number: ()								
XII.	ABATEMENT								
	A certified supervisor is required for each abduring the post-abatement cleanup and clear being conducted, the certified supervisor shall able to be present at the work site in no more	ance of work areas. At all o	other times when abatement activities are						
XIII	RENOVATION								
	A certified renovator is required for each ren are posted, while the required work area com- performed. The certified renovator must reg available either onsite or by telephone at all t	tainment is being establishe ularly direct work being pe	ed, and while required work area cleaning is erformed by other individuals and must be						
XIV	. CERTIFICATION OF ACCURACY								
	I certify that all of the above information is co		1/1/21/						
	Print Andrew Tidwell	Signature May []	Owes Date 4.10.25						
	Contact information for return mail or questions concerning the information on this Notice								
	Mailing Address: 1571 CR 478		10 00050						
	City: New Albany	State: <u>N</u>							
	Contact: Andrew Tidwell	Telephone N	Number: (662) 316-1915						
	Email: andy.tidwell@windowsusa.com								
Refe	r to fee schedule to calculate required noti	fication fee. Notification	fee must be submitted with notification.						
MAI	L TO: Mississippi Department of Enviro	onmental Quality							
	Lead Notifications								

P.O. Box 2261, Jackson, MS 39225