208941

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



MDEQ Us Email		Hand Deliver	Postmark (mail or y	ıly)	Date Received 4/18/2025	AI Numbe	er
Please che	eck all app	licable boxes	Renovation for the type of Notination was also sub	fication: 🔳	Original Revisio		ion Emergency
	PROJECT/SITE INFORMATION  Target Housing: Child-Occupied Facility:  Physical Address Project Site: 4647 Norway Dr						
					20206	Linda	
			State: MS			-	<del></del>
	Number of	Units to be A	bated/Renovated in t	he Building:	replacing 6 window	· · · · · · · · · · · · · · · · · · ·	
	BUILDING OWNER INFORMATION						
	Mr./Mrs.: Avalon Jackson						
		Owner: 4647		City:	Jackson	State: MS	ZIP: 39206
	Telephone	Number: ( <u>720</u>	969-2779				
III.	ABATEMENT/RENOVATION CONTRACTOR INFORMATION						
	Name of Certified Lead Abatement/Renovator Firm: Brian Wraight						
						50-7154 Ex	p. Date: 08/31/2025
			rm: 121 David Hend				
	City: Pela					Zin Code: 3	99145
	INSPECTION INFORMATION Name of Renovator/Inspector/Risk Assessor Conducting Inspection: Brian Wraight  Certification Number: PBR-00011222 Exp. Date: 07/21/2025 Date Inspection Conducted: Test Method Used & Manufacturer of Testing Equipment:						
				•			
	ror raint	Chip Analysi	s, Name of Labora	югу:	Certifica	ation Number	
	GENERAL CONTRACTOR (Other)  Name of Firm: Windows USA						
	Firm Mailing Address: PO Box 222 Royal, AR 71968						
		erson: Christin			_ Telephone Num	ber:(501)760	-0292
VI.	PROJEC	T DATES ect Start: 05		Le	ad Project Stop: 05		025
	Abatemer	nt/Renovation	to be done during	what time?	Day (5 a.m. − 5 Night (8 p.m. −	- · ·	Evening (5 p.m. – 8 p. Veekend
VII.	DESCRI	PTION OF I	PROCEDURES T	O BE USE	D (CHECK ALL	THAT APPI	LY)
	☐ Wet S ■ Conta	anding inment – Explain	Component R Strip and Rem	emoval	Heat Gun Negative A	<u> </u>	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: Brian Wraight								
	Full Mailing Address: 121 David Henderson Rd								
	City: Pelahatchie	State: MS	Zip Code: 39145						
	Contact: Brian Wraight	Telephone Number: (	<u>01)</u> 850-7154						
X.	WASTE LEAD DISPOSAL SITE Site Name: Mt. Helm Landrill								
	Physical Address: 495 Mt Helm Rd								
	Full Mailing Address: 495 Mt Helm Rd								
	City: Brandon		Zip Code: 39047						
XI.	DISPOSAL SITE FOR DEBRIS OTH	ER 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 aba during the post-abatement cleanup and cleara being conducted, the certified supervisor shall able to be present at the work site in no more t	nce of work areas. At all ot be onsite or available by tel	her times when abatement activities are						
XIII	RENOVATION								
	A certified renovator is required for each reno are posted, while the required work area conta performed. The certified renovator must regu available either onsite or by telephone at all tin	ainment is being established darly direct work being perf	, and while required work area cleaning is formed by other individuals and must be						
XIV	CERTIFICATION OF ACCURACY								
	I certify that all of the above information is correct.  Print Brian Wraight Signature Budwyraught Date 4.17.25								
	Print Brian Wraight S	ignature DWWW	raight Date 4.17.25						
	Contact information for return mail or questions concerning the information on this Notice  Mailing Address: 121 David Henderson Rd								
	City: Pelahatchie	State: MS	Zip Code: 39145						
	Contact: Brian Wraight		mber: (601) 850-7154						
	Email: brian.wraight@windowsusa.com	rerephone ive	imber. ()						
Refe	r to fee schedule to calculate required notif	ication fee. Notification f	ee must be submitted with notification.						
MAI	L TO: Mississippi Department of Environ Lead Notifications	nmental Quality							

P.O. Box 2261, Jackson, MS 39225