208057

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



Email	se Unly: Mail	☐Hand Deliver	y Postmark (mail on		15/2025	Al Nume	je:	
Please ch	eck all app	olicable boxes	Renovation	ication: 🔳 Orig	ginal Revisi	ion Cancell a		
'lease cl	heck if asbestos notification was also submitted for this project: PROJECT/SITE INFORMATION Target Housing: Child-Occupied Facility:							
	Physical Address Project Site: 120 Monmouth Rd City: Florence State: MS Zip Code: 39073 County: Rankin							
	Number of Units to be Abated/Renovated in the Building: Replacing 13 windows							
II.	BUILDING OWNER INFORMATION Mr./Mrs.: James Lott							
	Address of		onmouth Rd) 906-8817	City: Flore	ence	State: MS	ZIP: 39073	
III.	ABATEMENT/RENOVATION CONTRACTOR INFORMATION							
	Name of Certified Lead Abatement/Renovator Firm: Daniel Davis							
	Firm Certification Number: PBR-00011354 Telephone Number: (601) 344-8240 Exp. Date: 06/04/2025							
	Address of Certified Firm; 6 Hickory Spur							
	City: Laur	el		State: MS		Zip Code:	39443	
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:							
				51 y	Cottin	canon rambe		
V.			ACTOR (Other)					
	Name of Firm: Windows USA Firm Mailing Address: PO Box 222, Royal, AR 71968							
	Thin trianing reason.							
	Contact Person: Christine Walker Telephone Number: (501) 760-0292							
VI.		CT DATES ject Start: <u>05</u>	/ <u>29</u> / <u>2025</u>	Lead P	roject Stop:	05 /29 /	2025	
	Abateme	nt/Renovation	to be done during	<u> </u>	• .	- 5 p.m.) 🔲 . – 5 a.m.) 🔲	Evening (5 p.m. – 8 p.n Weekend	
VII.	DESCRI	PTION OF I	PROCEDURES TO	BE USED (CHECK AL	L THAT APF	PLY)	
	Wet S Conta	Sanding Sinment — Explain	Component Re	emoval [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: Daniel Davis							
	Full Mailing Address: 6 Hickory Spur							
	• —		Zip Code: 39443					
	Contact: Daniel Davis	Telephone Number	:(601)344-8240					
Χ.	WASTE LEAD DISPOSAL SITE							
Л.	Site Name: Canton Sanitary Landfill							
	Physical Address: 303 Soldiers Colony	Rd						
	Full Mailing Address:							
	Full Mailing Address: City: Canton	State: MS	7in Code: 39046					
			Zip Code.					
XI.	DISPOSAL SITE FOR DEBRIS OTHER THAN LEAD							
	Site Name:							
	Physical Address:							
	Full Mailing Address:							
	City:							
	Contact Person: NOTE: All debris (other than lead) should	Telephone Number	er: ()					
XIII	able to be present at the work site in no more	e than 2 hours.						
	A certified renovator is required for each rea are posted, while the required work area comperformed. The certified renovator must rea available either onsite or by telephone at all to	itainment is being establish gularly direct work being p	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 c							
	Print Daniel Davis	Signature	1 0000 Date 5.15.28					
	Contact information for return mail or questions concerning the information on this Notice							
	Mailing Address: 6 Hickory Spur							
	City: Laurel	State: N	//S Zip Code: 39443					
	Contact: Daniel Davis		Number: (601) 344-8240					
	Email: daniel.davis@windowsusa.com							
Dofo	- to for schedule to coloulate required - et	Gardian Car NadiGardian						
	r to fee schedule to calculate required not		i lee must be submitted with notification.					
MAI	IL TO: Mississippi Department of Envir Lead Notifications	onmental Quality -						
	P.O. Box 2261, Jackson, MS 3922	25						