



# Mississippi Office of Pollution Control

## Lead-Based Paint Abatement/Renovation Notification

<b>MDEQ Use Only:</b> <input checked="" type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery	<b>Postmark (mail only)</b>	<b>Date Received</b> 6/16/2025	<b>AI Number</b>
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Project Type: ☐ Abatement ☒ Renovation      Date of Building Construction: 1975

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: 307 N Street Dr

City: Brookhaven      State: MS      Zip Code: 39601      County: Lincoln

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

### II. BUILDING OWNER INFORMATION

Mr./Mrs.: JOSEPH BROWN

Address of Owner: 307 N Street Dr      City: Brookhaven      State: MS      ZIP: 39601

Telephone Number: (601) 720-4797

### III. ABATEMENT/RENOVATION CONTRACTOR INFORMATION

Name of Certified Lead Abatement/Renovator Firm: WindServ LLC

Firm Certification Number: NBF00000954      Telephone Number: (334) 378-9231      Exp. Date: 04/01/2026

Address of Certified Firm: 22 Triangle Dr

City: Laurel      State: MS      Zip Code: 39443

### IV. INSPECTION INFORMATION

Name of Renovator/Inspector/Risk Assessor Conducting Inspection: Daniel Davis

Certification Number: PBR-00011354      Exp. Date: 05/19/2026      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: 07 / 08 / 2025

Lead Project Stop: 07 / 08 / 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: Daniel Davis

Full Mailing Address: 6 Hickory Spur

City: Laurel State: MS Zip Code: 39443

Contact: Daniel Davis Telephone Number: (601) 344-8240

**X. WASTE LEAD DISPOSAL SITE**

Site Name: Canton Sanitary Landfill

Physical Address: 303 Soldiers Colony Rd

Full Mailing Address: \_\_\_\_\_

City: Canton State: MS Zip Code: 39046

**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 Daniel Davis Signature Daniel Davis Date 06/13/2025

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

Mailing Address: 6 Hickory Spur

City: Laurel State: MS Zip Code: 39443

Contact: Daniel Davis Telephone Number: (601) 344-8240

Email: daniel.davis@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