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APR 16 2021

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

Project Type: ☐ Abatement ☒ Renovation Date of Building Construction: unknown
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: ☒ Single Family Residence ☐ Multifamily Dwelling * (i.e. multifamily apartment, duplex, etc.)
Child-Occupied Facility: ☐ Daycare ☐ Pre-School ☐ Other _____
Physical Address Project Site 209 Chapparall - Hiwanee
City Hiwanee State MS Zip Code 39367 County Wayne ?
Number of Units to be Abated/Renovated in the Building _____

II. BUILDING OWNER INFORMATION

Mr./Mrs. Rhonda Jordan
Address of Owner Same City _____ State _____ Zip Code _____
Telephone Number 850-218-4200

III. ABATEMENT/RENOVATION CONTRACTOR INFORMATION

please Fill in
Name of Certified Lead Abatement/Renovator Firm Kevin Moore Const
Firm Certification Number NBF00000253 Telephone Number 601-434-6734 Exp. Date
Address of Certified Firm 3112 Glendale Ave
City Hattiesburg State MS Zip Code 39401

IV. INSPECTION INFORMATION

Name of 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 Lowes - Kevin Moore Const. subcontractor
Firm Mailing Address _____
Contact Person _____ Telephone Number _____

VI. PROJECT DATES

(weather permitting)
Lead Project Start 4 / 26 / 2021 Lead Project Stop 5 / 1 / 2021
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 ☐ Chemical Removal ☐ Heat Gun
☒ Containment ☐ Strip and Removal ☐ Negative Air
☐ Other – Explain Removing window sash + installing pocket windows

VIII. DESCRIPTION OF RENOVATION ACTIVITIES TO BE COMPLETED (INCLUDING COMPONENTS TO BE REMOVED)

_____

_____

IX. WASTE TRANSPORTER

Name Local garbage disposal company

Full Mailing Address _____

City _____ State _____ Zip Code _____

Contact _____ Telephone Number _____

X. WASTE LEAD DISPOSAL SITE

Site Name Local rubbish site

Physical Address _____

Full Mailing Address _____

City _____ State _____ 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 on-site 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 Moore Signature Kevin Moore Date 4-10-2021

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

Mailing Address 3112 Glendale Ave

City Hattiesburg State MS Zip Code 39401

Contact Kevin Moore Telephone Number 601-434-6734

Refer to fee schedule to calculate required notification fee. Notification fee must be submitted with notification.

MAIL TO: Mississippi Department of Environmental Quality
Lead Program
PO Box 2261
Jackson, MS 39225
(601) 961-5171

OR Mississippi Department of Environmental Quality
Lead Program
515 East Amite Street
Jackson, MS 39201