



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

Franklin Gwynn Gulfport/2901 11086662
Customer Last Name Customer First Name Store/Branch # Lead/Customer Order #

Project Type: [ ] Abatement [X] Renovation Date of Building Construction: 1974

Please check all applicable boxes for the type of Notification:

[X] Original [ ] Revision [ ] Cancellation [ ] Emergency

Please check if asbestos notification was also submitted for this project: [ ]

I. PROJECT/SITE INFORMATION

Target Housing: [X] Single Family Residence [ ] Multifamily Dwelling \* (i.e. multifamily apartment, etc.)
Child-Occupied Facility [ ] Daycare [ ] Pre-School [ ] Other

Physical Address Project Site 2508 East Birch Dr
City Gulfport State MS Zip 39503 County Harrison
Number of Units to be Abated/Renovated in the Building N/A

II. BUILDING OWNER INFORMATION

Mr./Mrs. Gwynn Franklin
Address of Owner 2508 East Birch Dr City Gulfport State MS Zip 39503
Telephone Number 228-326-4579

III. ABATEMENT/RENOVATION CONTRACTOR INFORMATION

Name of Certified Lead Abatement/Renovator Firm James Adams
Firm Certification Number NBF-00000748 Exp. Date 01/27/22 Contact Name James Adams
Address of Certified Firm 419 Carolyn
City New Orleans State LA Zip 70123 Telephone Number 504-382-4578

IV. INSPECTION INFORMATION

For Renovations: Type of lead testing equipment used "ASSUMED OR LEAD TEST SWAB"
For Abatement: 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 THE HOME DEPOT
Firm Mailing Address 2455 PACES FERRY RD; C11
Contact Person DIRECTOR OF SERVICES COMPLIANCE Telephone Number 770-384-2681

VI. PROJECT DATES

Lead Project Start 10/04/2021 Lead Project Stop 10/04/2021
Abatement/Renovation to be done during what time? [X] 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 [X] Renovator will follow lead safe work practices under the EPA's RRP rule.



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**VIII. DESCRIPTION OF RENOVATION ACTIVITIES TO BE COMPLETED (Including components to be removed)**

3 replacement windows

**IX. WASTE TRANSPORTER (Not required for Residential projects)**

Name N/A  
 Full Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Contact \_\_\_\_\_ Telephone Number \_\_\_\_\_

**X. WASTE LEAD DISPOSAL SITE**

Site Name --SEE ONSITE PERSONNEL--  
 Physical Address \_\_\_\_\_  
 Full Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**XI. DISPOSAL SITE FOR DEBRIS OTHER THAN LEAD**

Site Name --SEE ONSITE PERSONNEL--  
 Physical Address \_\_\_\_\_  
 Full Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Contact \_\_\_\_\_ 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 2 hours or less.

**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 THE HOME DEPOT Signature THE HOME DEPOT Date 08/17/2021

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

Mailing Address 2455 PACES FERRY ROAD; C-11  
 City ATLANTA State GA Zip 30339  
 Contact DIRECTOR OF SERVICES COMPLIANCE Telephone Number 770-384-2681

For Abatements, refer to fee schedule to calculate required notification fee. Notification fee must be submitted with notification.

**MAIL TO: Mississippi Department of Environmental Quality OR  
 Lead Section  
 P.O. Box 2261  
 Jackson, MS 39225  
 (601) 961-5171**

**Mississippi Department of Environmental Quality  
 Lead Section  
 515 East Amite Street  
 Jackson, MS 39201**