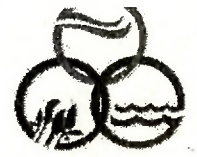


"Rev"

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



MDEQ Use Only: <input type="checkbox"/> Email <input type="checkbox"/> Mail <input checked="" type="checkbox"/> Hand Delivery	Postmark (mail only)	Date Received 4.11.2022	AI Number
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Project Type: Abatement Renovation Date of Building Construction: _____
 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:

RECEIVED
 APR 11 2022
 DEPT. OF ENVIRONMENTAL QUALITY

I. PROJECT/SITE INFORMATION

Target Housing:
 Child-Occupied Facility:
 Physical Address Project Site: 135 Gilchrist Street
 City: Fayette State: MS Zip Code: 39069 County: Jefferson
 Number of Units to be Abated/Renovated in the Building: 1

II. BUILDING OWNER INFORMATION

Mr./Mrs.: Stella Gales
 Address of Owner: 57 Spring St. City: Fayette State: MS ZIP: 39069
 Telephone Number: (601) 786-3224

III. ABATEMENT/RENOVATION CONTRACTOR INFORMATION

Name of Certified Lead Abatement/Renovator Firm: Bestway Abatement
 Firm Certification Number: NBF-00000822 Telephone Number: (601) 383-3237 Exp. Date: 4/10/23
 Address of Certified Firm: 222 Vicksburg St. P.O. Box 88
 City: Edwards State: MS Zip Code: 39066

IV. INSPECTION INFORMATION

Name of Renovator/Inspector/Risk Assessor Conducting Inspection: Aaron Lee
 Certification Number: PBT-00001461 Exp. Date: 5/24/2022 Date Inspection Conducted: 3/19/2021
 Test Method Used & Manufacturer of Testing Equipment: SW846 3050B/7000B
 For Paint Chip Analysis, Name of Laboratory: EMSL Certification Number: 01950

V. GENERAL CONTRACTOR (Other)

Name of Firm: A+R Construction LLC (PBS-00007912)
 Firm Mailing Address: 212 Virginia Avenue - Vadalia, Louisiana
 Contact Person: Delia Bryan Telephone Number: (601) 807-9420

VI. PROJECT DATES

Lead Project Start: 04/05/2022 Lead Project Stop: 05/03/2022
 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 Component Removal Heat Gun Encapsulation
 Containment Strip and Removal Negative Air Enclosure
 Other – Explain

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

Replace windows + flooring, take out 2 walls

IX. WASTE TRANSPORTER

Name: Aestway Abatement
Full Mailing Address: P.O. Box 88
City: Edwards State: Ms Zip Code: 39066
Contact: Aaron Lee Telephone Number: (601) 383-3237

X. WASTE LEAD DISPOSAL SITE

Site Name: Riverbend Environmental Services, LLC
Physical Address: 4451 HWY 61
Full Mailing Address: same
City: Fayette State: Ms Zip Code: 39069

XI. DISPOSAL SITE FOR DEBRIS OTHER THAN LEAD

Site Name: Riverbend Environmental Services, LLC
Physical Address: 4451 HWY 61
Full Mailing Address: same
City: Fayette State: Ms Zip Code: 39069
Contact Person: _____ Telephone Number: (601) 786-0217
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 Aaron Lee Signature Aaron Lee Date 4/11/2022

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

Mailing Address: P.O. Box 88
City: Edwards State: Ms Zip Code: 39066
Contact: Aaron Lee Telephone Number: (601) 383-3237
Email: bestwayjackson@yahoo.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