

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

job 187168



MDLQ Use Only: <input checked="" type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery	Postmark (mail only)	Date Received 4/26/22	AI Number
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Project Type: Abatement Renovation Date of Building Construction: 1976
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: 107 Thompson St
City: Artesia State: MS Zip Code: 39736 County: Lowndes
Number of Units to be Abated/Renovated in the Building: 5

II. BUILDING OWNER INFORMATION

Mr./Mrs.: Luster Sharrod
Address of Owner: 107 Thompson St City: Artesia State: MS ZIP: 39736
Telephone Number: (662) 386-3065

III. ABATEMENT/RENOVATION CONTRACTOR INFORMATION

Name of Certified Lead Abatement/Renovator Firm: Chandler Moody
Firm Certification Number: PBR-00011171 Telephone Number: (662) 507-5154 Exp. Date: 12/14/2022
Address of Certified Firm: 1691 CR 171
City: Blue Springs State: MS Zip Code: 38828

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: _____

V. GENERAL CONTRACTOR (Other)

Name of Firm: Windows USA
Firm Mailing Address: PO Box 222 Royal AR 71968
Contact Person: Mia Walsh Telephone Number: (501) 760-0309

VI. PROJECT DATES

Lead Project Start: 05 / 03 / 2022 Lead Project Stop: 05 / 04 / 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)

Retro Fit Pocket Replacement of Existing Windows with New Vinyl Windows

IX. WASTE TRANSPORTER

Name: Chandler Moody

Full Mailing Address: 1691 CR 171

City: Blue Springs State: MS Zip Code: 38828

Contact: Chandler Moody Telephone Number: (662) 507-5154

X. WASTE LEAD DISPOSAL SITE

Site Name: _____

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 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 Chandler Moody Signature Chandler Moody Date 04/26/2022

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

Mailing Address: 1691 CR 171

City: Blue Springs State: MS Zip Code: 38828

Contact: Chandler Moody Telephone Number: (662) 507-5154

Email: chandler.moody@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**