

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

job-189614



MDEQ Use Only: <input checked="" type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery	Postmark (mail only)	Date Received <u>6/13/2022</u>	AI Number
--	----------------------	-----------------------------------	-----------

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: 1020 SE Ave  
City: Baldwyn   State: MS   Zip Code: 38824   County: Lee  
Number of Units to be Abated/Renovated in the Building: 11

II. BUILDING OWNER INFORMATION

Mr./Mrs.: Betty Mgee  
Address of Owner: 1020 SE Ave   City: Baldwyn   State: MS   ZIP: 38824  
Telephone Number: (662) 365-9994

III. ABATEMENT/RENOVATION CONTRACTOR INFORMATION

Name of Certified Lead Abatement/Renovator Firm: Andrew Tidwell  
Firm Certification Number: PBR-00008575   Telephone Number: (662) 316-1915   Exp. Date: 12/14/2022  
Address of Certified Firm: 1571 CR 478  
City: New Albany   State: MS   Zip Code: 38652

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: 06 / 20 / 2022   Lead Project Stop: 06 / 22 / 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)

- |   |  |                                       |  |
|---|--|---------------------------------------|--|
| <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: Andrew Tidwell  
Full Mailing Address: 1571 CR 478  
City: New Albany State: MS Zip Code: 38652  
Contact: Andrew Tidwell Telephone Number: (662) 316-1915

**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 Andrew Tidwell Signature Andrew Tidwell Date 06/13/2022

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

Mailing Address: 1571 CR 478  
City: New Albany State: MS Zip Code: 38652  
Contact: Andrew Tidwell Telephone Number: (662) 316-1915  
Email: andy.tidwell@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