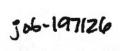
Mississippi Office of Pollution Control Lead-Based Paint Abatement/Renovation Notification





MDEQ I		□	Postmark (mail only)	Date Received	AI Ni	ımber			
⊠Email	Mail	Hand Delivery		12-21-2022					
Project	Type:	Abatement	Renovation D	ate of Building Con	struction: 19	21			
			-			ellation Emergency			
			on was also submitte						
I.	PROTE	CT/SITE INFOR	MATION						
1.	Target Housing: Child-Occupied Facility:								
	Physical Address Project Site: 1372 Napanee Rd								
	City: Lela	nd	State: MS	Zip Code: 38756	County: Wa	shington			
	Number o	of Units to be Abate	ed/Renovated in the Bu	Ilding: 9					
II.	BUILDING OWNER INFORMATION								
	Mr /Mrs · Bird Hakeem								
	Address	f Owner; 1372 Na	panee Rd	City: Leland	State: M	S ZIP: 38756			
	Telephone	e Number: (662) 3	94-1691						
III.	ABATE	MENT/DENOV	ATION CONTRAC	TOD INFORMATI	ON				
111.	ABATEMENT/RENOVATION CONTRACTOR INFORMATION Name of Certified Lead Abatement/Renovator Firm: AJ Harvey								
	Piane of Certified Lead Abatement/Renovator Firm: 101/05/2023								
		Firm Certification Number: PBR-00008571 Telephone Number: (501) 467-2522 Exp. Date: 01/05/2023 Address of Certified Firm: 300 Crabapple Ln							
				ΛD	R' 0 1	71020			
	City: Bisr	narck	Stat	e: AN	Zip Cod	e: / 1929			
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, 1	Name of Laboratory:_	Cert	ification Num	ber:			
V.	GENERAL CONTRACTOR (Other)								
	Name of Firm: Windows USA								
	Firm Mailing Address: PO Box 222 Royal, AR 71968								
	Contact Person: Chrystal Baugher Telephone Number: (501) 287-4826								
***				Mag as Company	1510000000				
VI.	Lead Pro	,	/30 /2022	Lead Project Stop		/2022			
	Abateme	nt/Renovation to	be done during what		ı. – 5 p.m.) [m. – 5 a.m.) [Evening (5 p.m. – 8 p.m. Weekend			
× vn.	DESCRI	PTION OF PRO	OCEDURES TO BE	USED (CHECK A	LL THAT A	PPLY)×			
. ,	☐ Wet S	Sanding _	Component Remov	al Heat G	un [Encapsulation			
		inment – Explain	Strip and Removal	Negativ	e Air	Enclosure			

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: AJ Harvey						
	Full Mailing Address: 300 Crabapple I	Ln					
	City; Bismarck	State: AR	Zip Code: 71929	1000			
	Contact: AJ Harvey	Telephone Number	: (501) 467-2522				
X.	WASTE LEAD DISPOSAL SITE Site Name: Canton Sanitary Landfill						
	Physical Address: 303 Soldiers Colony	y Rd					
	Full Mailing Address:		<u> </u>	100			
	Full Mailing Address: City: Canton	State: MS	Zip Code: 39046				
XI.	DISPOSAL SITE FOR DEBRIS OTHER THAN LEAD Site Name:						
	Physical Address:			<u>f</u>			
	Full Mailing Address:						
	City: Contact Person:	State:	Zip Code:				
	Contact Person:	Telephone Numbe	r: ()				
XIII	A certified renovator is required for each reare posted, while the required work area coperformed. The certified renovator must re	enovation project and shall b ntainment is being establishe gularly direct work being po	ed, and while required work erformed by other individua	area cleaning is			
VIV	available either onsite or by telephone at all CERTIFICATION OF ACCURACY	-	conducted.				
AI V	I certify that all of the above information is						
	Print AJ Harvey	Signature At Harv	UL Date	12/21/2022			
	Mailing Address: 300 Crabapple Ln City: Bismarck	State: A	R Zip Code: 7	1929			
		Telephone N					
	Email: aharvey@windowsusa.com	•					
	L TO: Mississippi Department of Envir Lead Notifications P.O. Box 2261, Jackson, MS 392	ronmental Quality	fee must be submitted w	ith notification.			