job-197695

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



MDEQ Us			Postmark (mail only)	Date Received	AI Number				
⊠Email ■	□Mail	Hand Delivery			12-27-2022					
Project 1	Tyne:	Abatement	Renovation	Date of	Building Construction	on: pre-1978				
Please che	eck all an	plicable boxes for	the type of Notific	ation: 🔳	Original Revision	Cancellation Emergency				
			ion was also subm			,				
	Target Ho	CT/SITE INFO cusing: [1] cupied Facility: [1]								
	Physical Address Project Site: 65 Line Rd									
	City: Laurel State: MS Zip Code: 39443 County: Jones									
	Number of Units to be Abated/Renovated in the Building: 19									
	Mr./Mrs.: John or Cindy Boswell									
	ivir./ivirs.:	65 Line	Rd	City	Laurel	State: MS ZIP: 39443				
				City		211				
		elephone Number: (601) 498-5244								
		BATEMENT/RENOVATION CONTRACTOR INFORMATION								
	Name of Certified Lead Abatement/Renovator Firm: John Tew									
	Firm Certification Number: PBR-00010112 Telephone Number: (334) 378-9231 Exp. Date: 08/02/2023									
	Address	of Certified Firn	1: 30 Triangle Dr		· · · · · · · · · · · · · · · · · · ·					
	City: Lau	rel		State: MS	Z	Zip Code: <u>39443</u>				
IV.	INSPEC	TION INFORM	/ATION							
14.	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:									
		AL CONTRAC								
	Name of Firm: Windows USA									
	Firm Mailing Address: PO Box 222 Royal, AR 71968									
	Contact 1	Person: Chrystal	Baugher ·		Telephone Number	(501) 287-4826				
VI.		CT DATES ject Start: 01	_/04 /2023	Le	ad Project Stop: 01	/06 /2023				
	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									
	PBC-25:	ADMICAL OES DE	OCEDIDES TO	कार राटक	-					
VII.					D (CHECK ALL TH					
	Conta	Sanding ainment r — Explain	Component Res		☐ Heat Gun ☐ Negative Air	☐ Encapsulation ☐ 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: John Tew										
	Full Mailing Address: 30 Triangle Dr										
		State: MS		Zip Code: 39443							
	Contact: John Tew	one Number: (334) 378-923	31							
X.	WASTE LEAD DISPOSAL SITE Site Name: Republic Services Little Dix	tie Landfill									
	Physical Address: 1716 N County Line Rd										
	Full Mailing Address:										
	City: Ridgeland	Sta	_{ite:} MS	_ Zip Code:	39157						
XI.	DISPOSAL SITE FOR DEBRIS OTHER THAN LEAD										
	Site Name:										
	Physical Address:										
	Full Mailing Address:										
	City:	Sta	ite:	_ 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 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, an able to be present at the work site in no more than 2 hours.										
XII	I.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	XIV. CERTIFICATION OF ACCURACY										
	I certify that all of the above information is				40,07,000						
	Print John Tew	Signature_	John Tee	ديـ	Date 12/27/2022						
	Contact information for return mail or questions concerning the information on this Notice										
	Mailing Address: 30 Triangle Dr				30443						
	City: Laurel		State: IVIS	224	Zip Code: 39443						
	Contact: John Tew		Telephone Nu	ımber: (<u>334</u>) 37 0-923 1						
	Email: john.tew@windowsusa.com										
Ref	er to fee schedule to calculate required no	otification fee	. Notification f	fee must be si	abmitted with notification.						

MAIL TO: Mississippi Department of Environmental Quality

Lead Notifications

P.O. Box 2261, Jackson, MS 39225