

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

657841



MDEQ Use Only: [X] Email [ ] Mail [ ] Hand Delivery
Postmark (mail only)
Date Received: 4/06/2024
AI Number: 82213

Project Type: [ ] Abatement [X] Renovation Date of Building Construction: 1975
Please check all applicable boxes for the type of Notification: [X] Original [ ] Revision [ ] Cancellation [ ] Emergency
Please check if asbestos notification was also submitted for this project: [ ]

I. PROJECT/SITE INFORMATION

Target Housing: [X]
Child-Occupied Facility: [ ]

Physical Address Project Site: 7 Broadmoor Dr
City: Laurel State: MS Zip Code: 39440 County: Jones
Number of Units to be Abated/Renovated in the Building: Replacing 12 windows

II. BUILDING OWNER INFORMATION

Mr./Mrs.: Karen Speir
Address of Owner: 7 Broadmoor Dr City: Laurel State: MS ZIP: 39440
Telephone Number: (601) 319-1204

III. ABATEMENT/RENOVATION CONTRACTOR INFORMATION

Name of Certified Lead Abatement/Renovator Firm: Daniel Davis
Firm Certification Number: PBR-00011354 Telephone Number: (601) 344-8240 Exp. Date: 06/04/2024
Address of Certified Firm: 6 Hickory Spur
City: Laurel State: MS Zip Code: 39443

IV. INSPECTION INFORMATION

Name of Renovator/Inspector/Risk Assessor Conducting Inspection:
Certification Number: Exp. Date: Date Inspection Conducted: 3/4/24
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: Christine Walker Telephone Number: (501) 760-0292

VI. PROJECT DATES

Lead Project Start: 04 / 17 / 2024 Lead Project Stop: 04 / 17 / 2024
Abatement/Renovation to be done during what time? [X] 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
[X] 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: Kory Brown

Full Mailing Address: 300 West Mountain View

City: Hot Springs State: AR Zip Code: 71913

Contact: Kory Brown Telephone Number: (501) 547-4138

**X. WASTE LEAD DISPOSAL SITE**

Site Name: Canton Sanitary Landfill

Physical Address: 303 Soldiers Colony Rd

Full Mailing Address: \_\_\_\_\_

City: Canton State: MS Zip Code: 39046

**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 Daniel Davis

Signature 

Date 04/06/2024

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

Mailing Address: 6 Hickory Spur

City: Laurel State: MS Zip Code: 39443

Contact: Daniel Davis Telephone Number: (601) 344-8240

Email: daniel.davis@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