

8.4 REGULATORY INSPECTION SUMMARY

Date: 03/23/05
To: (Plant Mgr.) Earl L. Deskins
From: Linda Campbell

Regulatory Inspection Summary

1. Facility Inspected Kingston Fossil Plant

2. Date of Inspection & duration 03/23/05 - 1 hour

3. Purpose of Inspection (routine compliance, NOV follow-up, permit renewal)
Routine Compliance - Quarterly

4. Media covered during inspection Solid Waste

5. Name of Inspector & Agency Ryan Miller - TDEC

6. Facility personnel participating or contacted during inspection Jim Settles and Linda Campbell

7. Observations or problem identified by inspector
No Violations

8. Samples collected No

9. Records Reviewed No

10. Deficiencies None

Submitted by: Linda Campbell

cc: Mgr., ENV. AFF. (Betty Dyer)

cc: VP, EP+P

NOTE: This summary is to be provided to the facility manager and faxed or e-mailed to ENV AFF (751-7011) by the close of business on the day following the inspection. (See Section 6.2.6)



TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION  
DIVISION OF SOLID WASTE MANAGEMENT  
SOLID WASTE DISPOSAL FACILITY EVALUATION

677

NAME OF SITE <b>TVA Kingston Fossil Plant</b>		REGISTRATION NUMBER <b>IDC 53-0094</b>		DATE <b>3-23-05</b>		
LOCATION (physical) <b>Swann Pond Rd. - Kingston TN</b>		PURPOSE <input checked="" type="checkbox"/> Complete <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other				
OWNER/OPERATOR <b>TVA - Linda Campbell</b>		TYPE OF FACILITY <input type="checkbox"/> CLASS I <input checked="" type="checkbox"/> CLASS II <input type="checkbox"/> CLASS III <input type="checkbox"/> CLASS IV				
		V1	V2		V1	V2
Inadequate vector control	8010	___	___	Leachate improperly managed	8330	___
Access not limited to operating hours	8020	___	___	Inadequate leachate collection system	8340	___
Inadequate artificial or natural barrier	8030	___	___	Leachate observed at the site	8350	___
Inadequate information signs	8040	___	___	Leachate entering runoff	8360	___
Unsatisfactory access road(s)/parking area(s)	8050	___	___	Leachate entering a water course	8370	___
Certified personnel not present during operating hours	8060	___	___	Inadequate gas migration control system	8380	___
Unapproved salvaging of waste	8070	___	___	Inadequate maintenance of gas migration control system	8390	___
Evidence of open burning	8080	___	___	Potential for explosions or uncontrolled fires	8420	___
Inadequate fire protection	8090	___	___	Waste not confined to a manageable area	8430	___
Unsatisfactory litter control	8110	___	___	Improper spreading of waste	8440	___
Inadequate employee facilities	8120	___	___	Improper compacting of waste	8450	___
No communication devices	8130	___	___	Unsatisfactory initial cover	8460	___
Inadequate operating equipment	8140	___	___	Unsatisfactory intermediate cover	8470	___
Unavailability of backup equipment	8150	___	___	Unsatisfactory final cover	8480	___
Unavailability of cover material	8160	___	___	Excessive pooling of water	8490	___
Inadequate maintenance of runoff/runoff system(s)	8170	___	___	Unsatisfactory stabilization of cover	8510	___
Inadequate erosion control	8180	___	___	Dumping of waste into water	8520	___
Inadequate dust control	8190	___	___	Unsatisfactory records or reports	8530	___
Unauthorized waste accepted	8210	___	___	Groundwater monitoring system improperly maintained	8540	___
Unapproved special waste accepted	8220	___	___	Operation does not correspond with engineering plans	8570	___
Tires improperly handled	8230	___	___	Operation does not correspond with permit condition(s)	8580	___
Medical waste improperly handled	8240	___	___	Permit, plans, operating manual not available	8590	___
Dead animals improperly handled	8250	___	___	No operating scales	8610	___
Washout of solid waste	8270	___	___			
No permanent benchmark	8280	___	___			
Inadequate random inspection program	8290	___	___			
Mishandling of special waste	8300	___	___			
Buffer zone standard violated	8310	___	___			
Inadequate maintenance of leachate management system	8320	___	___			
COMMENTS:						
<p><b>- No VIBRATIONS</b></p>						
PERSON INTERVIEWED (Signature) <i>Linda Campbell</i>				INSPECTED BY (Signature) <i>[Signature]</i>		
TITLE				TITLE <b>OES - DSWM</b>		
TIME OF DAY <b>12:00</b>	WEATHER CONDITIONS <b>500 - Sunny</b>		COMPLIANCE DATE			

Distribution: Facility - White      Field Office - Canary      Central Office - XC