

### 8.4 REGULATORY INSPECTION SUMMARY

Date: 12/03/07  
To: (Plant Mgr.) Michael Beckham  
From: Linda Campbell

#### Regulatory Inspection Summary

1. Facility Inspected Kingston Fossil Plant
  2. Date of Inspection & duration 12/03/07 - 1 hour
  3. Purpose of Inspection (routine compliance, NOV follow-up, permit renewal)  
Routine - Quarterly
  4. Media covered during inspection Solid Waste
  5. Name of Inspector & Agency David Fugate - TDEC
  6. Facility personnel participating or contacted during inspection Linda Campbell & James Settles
  7. Observations or problem identified by inspector  
NONE
  8. Samples collected No
  9. Records Reviewed No
  10. Deficiencies No Violations
- Submitted by: Linda Campbell

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

**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**

NAME OF SITE <i>TVA Kingston Fossil Plant</i>		REGISTRATION NUMBER <i>102 75-0094</i>		DATE <i>12/3/02</i>		
LOCATION (physical) <i>Swain Road Kingston TN</i>			PURPOSE <input checked="" type="checkbox"/> Complete <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other			
OWNER/OPERATOR <i>TVA - Cnda Campbell</i>			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: <i>- no violation</i>						
PERSON INTERVIEWED (Signature) <i>Cnda Campbell</i>			INSPECTED BY (Signature) <i>[Signature]</i>			
TITLE <i>PTE</i>			TITLE <i>Geologist</i>			
TIME OF DAY <i>12:45P</i>		WEATHER CONDITIONS <i>Sunny/cold</i>		COMPLIANCE DATE		

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