

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF AIR POLLUTION CONTROL
SOURCE INSPECTION REPORT FORM

I. GENERAL INFORMATION

SOURCE NAME DOMINION TERMINAL REGISTRATION NO. 60997
LOCATION TERMINAL BLVD NPN INSPECTION DATE 020394
COUNTY NO. 700 PLANT ID 00074 SOURCE TYPE COAL STORAGE
SOURCE CLASS (CIRCLE ALL APPLICABLE CLASSES) A1 A2 B NSPS PSD NESHAP TOXIC
SOURCE CONTACT MR Tom Novick WEATHER CONDITIONS FAIR/COOL

TYPE OF INSPECTION

☒ SCHEDULED INSPECTION ☐ PERMIT COMPLETION
☐ FOLLOW-UP INSPECTION ☐ COMPLAINT INVESTIGATION
☐ OTHER (EXPLAIN) _____ ANNOUNCED INSPECTION (CIRCLE ONE) YES NO

INSPECTION LEVEL PERFORMED (CIRCLE ONE) 0 1 2 3 4 COMPLIANCE CODE 3

VEE PERFORMED (CIRCLE ONE) YES NO INDICATES COMPLIANCE (CIRCLE ONE) YES NO

OPERATING RATE SEE ATTACHED

INSPECTOR J. STEWART STAFF CODE 789

CODING INFORMATION FOR COMPLIANCE STATUS

0 - UNKNOWN	3 - IN COMPLIANCE BY INSPECTION	6 - IN VIOLATION, NOT MEETING SCHEDULE
1 - IN VIOLATION - NO SCHEDULE	4 - IN COMPLIANCE BY CERTIFICATION	7 - IN VIOLATION, UNKNOWN WITH RESPECT TO SCHEDULE
2 - IN COMPLIANCE BY SOURCE TEST	5 - IN VIOLATION, MEETING SCHEDULE	8 - NO APPLICABLE STATE REGULATIONS
		9 - IN COMPLIANCE, CLOSED

II. INSPECTION SUMMARY

Were actual or potential compliance problems identified during this inspection? YES _____ NO ✓ (If yes explain in comments section.)

Complaints: Are compliance problems indicated? YES _____ NO ✓ (If yes, explain in the comment section.)

Does source experience excessive malfunctions? YES _____ NO ✓ If yes, describe: _____

Has any enforcement action been initiated during the past two years? YES _____ NO ✓

Is inspection needed due to on-going or recently completed enforcement? YES _____ NO ✓

II. INSPECTION SUMMARY (CONTINUED)

PAGE 2

Is there an on-going compliance problem? YES ☐ NO ☒ If yes, describe:

Are there compliance problems involving more than one control or process system?
YES ☐ NO ☒ N/A

Are all compliance problems indicated above minor? YES ☐ NO ☒ N/A

If yes, are all compliance problems identified above now resolved?
YES ☐ NO ☒ N/A

Is a follow-up inspection needed? YES ☐ NO ☒

Rate control equipment/process vulnerability to upset:
Very High ☐ High ☐ Average ☒ Low ☐

Rate O & M practices at the site:
Very High ☐ High ☐ Average ☒ Low ☐

Rank the source from 1 (lowest priority) to 4 (highest priority) for an inspection next year based on your overall evaluation of the source: 2

III. INSPECTION COMMENTS:

Source was dumping and laying out coal onto piles at 1000 T per hr. Ship "Mangel Pride" was being top-off. No visual emission from transfer points, silo baghouses, or coal piles. (See VEEK on baghouse silo). Control system was just coming on line from freeze condition. (See attached). 18.94 ug/m³ plate out at 1000. Under normal conditions i.e. T°F * 29 value would have been 10.99 with an efficiency of 88.78%

ADDITIONAL COMMENTS? YES ☐ (See Page(s) ☐) NO ☐

INSPECTOR'S SIGNATURE _____

DATE: / /

SUPERVISOR'S COMMENTS: _____

SUPERVISOR'S SIGNATURE _____

DATE: / /

III. INSPECTION COMMENTS (CONTINUED)

PAGE 2

SOURCE NAME: Demaria Terminal -

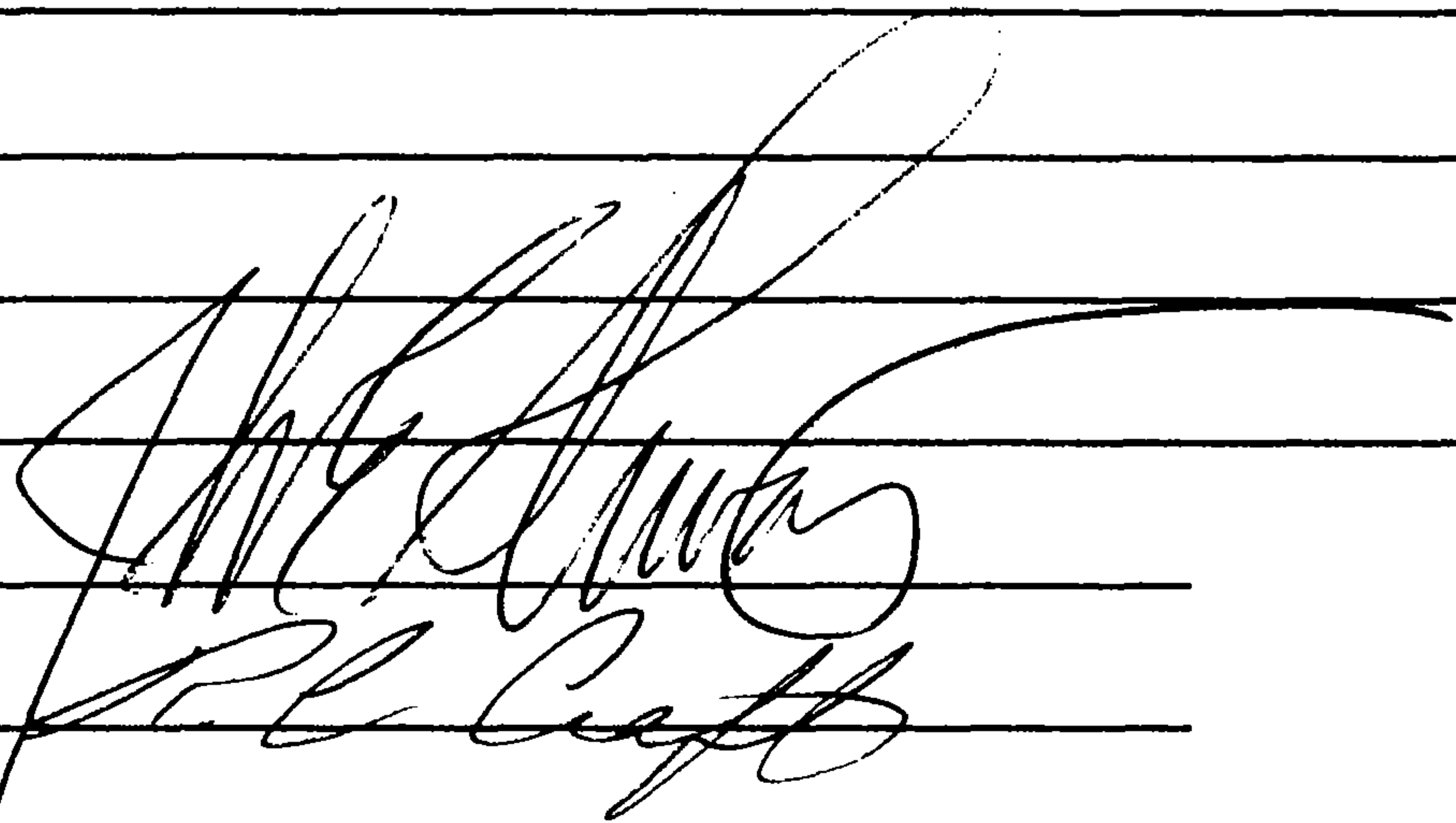
REGISTRATION NO 00074

LOCATION: Terminal Blvd.

INSPECTION DATE 020394

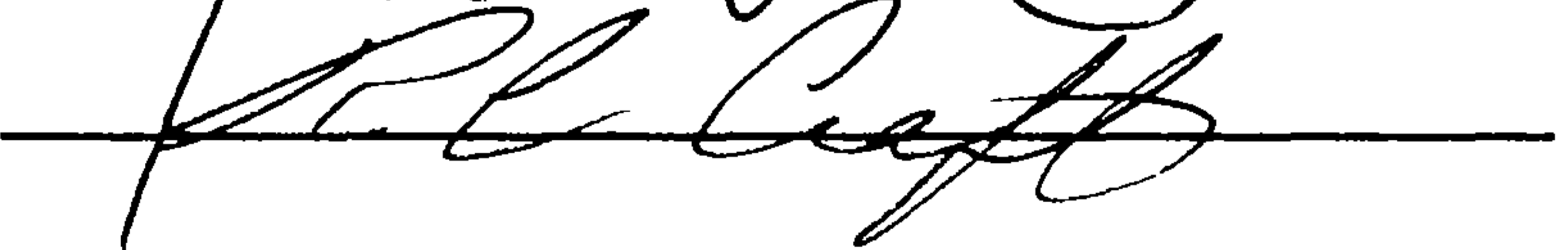
COMMENTS (CONTINUED): for the day. As is efficiency
was 79.4306 with more cycles than necessary
due to post freeze pull out.

INSPECTOR'S SIGNATURE



DATE: 02108194

SUPERVISOR'S SIGNATURE



DATE: 212194

OCR

The following pages contain the Optical Character Recognition text of the preceding scanned images.

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DEPARTMENT OF AIR POLLUTION CONTROL
SOURCE INSPECTION REPORT FORM

I. GENERAL INFORMATION

SOURCE NAME _____, REGISTRATION NO. _____

LOCATION, INSPECTION DATE _____

COUNTY NO. PLANT ID SOURCE TYPE 06--@ 'q Z, 12.* e7

SOURCE CLASS (CIRCLE ALL APPLICABLE CLASSES) A1 (o B NSPS PSD NESHAP TOXIC

SOURCE CONTACT Zt@') <__ WEATHER CONDITIONS _____

TYPE OF INSPECTION _____

all'-s"CHEDULED INSPECTION PERMIT COMPLETION _____

F-I FOLLOW-UP INSPECTION F-I COMPLAINT INVESTIGATION _____

OTHER (EXPLAIN) YES (N::0)

ANNOUNCED INSPECTION (CIRCLE ONE) _____

INSPECTION LEVEL PERFORMED (CIRCLE ONE) 0 1 3 4 COMPLIANCE CODE F7

VEE PERFORMED (CIRCLE ONE) 0@ (ED NO
E.S,1@ NO INDICATES COMPLIANCE (CIRCLE ONE)

.--?: C-,//, 6 -- 4)

OPERATING RATE @=)

(@)____

INSPECTOR) STAFF CODE _____

CODING INFORMATION FOR COMPLIANCE STATUS

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2 - IN COMPLIANCE BY SOURCE TEST 5 - IN VIOLATION, MEETING SCHEDULE TO SCHEDULE

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Is inspection needed@e@to on-going or recently completed enforcement? YES NO

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PAG-E 2

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next year based on your overall evaluation of the source:

III. IPSPECTION COMMENTS:
-7-

e2-

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I/ 64 7e
ADDITIONAL COMMENTS? YES (See Page(s) NO
INSPECTOR'S SIGNATURE DATE:
SUPERVISOR'S COMMENTS:

SUPERVISOR'S SIGNATURE DATE:

111. INSPECTION COMMENTS (CONTINUED) PAGE

ln@v

SOURCE NAME: REGISTRATION NO

LOCATION: INSPECTION D 1f@@ L3 ICA
'A

COMMENTS (CONTINUED)-; ,-- ,\

INSPECTOR'S SIGNATURE DATE:

SUPERVISOR'S SIGNATURE DATE: