DEPARTMENT OF ENVIRONMENT AND CONSERVATION
TENNESSEE DIVISION OF AIR POLLUTION CONTROL
ANNUAL INSPECTION

Facility No.: 56-0067 **Lead Inspector:** PRV
State Category: TM

Date Inspected: August 9, 2013 **On-Site:** ___X___**YES** _____**NO**

Company Name: US Cellular
Location address: 461 Green Grove Road
City/State/Zip: Westmoreland, Tennessee 37083

Mailing Address, if different: 8410 West Bryn Mawr Avenue, Suite 900
Chicago, IL 60631

Responsible Official/Title: Mr. Ronald Lewis, Environmental, Health, & Safety Manager
Phone: 773-355-3717
E-Mail Address: ronald.lewis@uscellular.com

Facility Contact/Title: Mr. Mike Clark, Network Field Engineer
Phone: 931-979-0041
E-Mail Address: michael.clark@uscellular.com

Date of the last annual inspection: n/a
Time period covered by this inspection, from: August 9, 2011 **to:** August 9, 2013
Is inspection partial or comprehensive? Comprehensive

Total time required for this inspection (hours): 19

Was company in compliance during entire inspection time period? _____**YES** ___X___**NO**
If NO, enter data below and explain violation(s) after table.

Violation(s) Description	NOV Date	Issued By (EFO, CV, Permitting)	EAR #
Incomplete records	September 17, 2013	EFO	13705

Comments: Records could not be corrected for the period of August 9, 2011 through December 31, 2011, because US Cellular did not retain their 2011 data on their server; however, records were available and corrected for 2012 and 2013, and were emailed to PRV on September 9, 2013.

Current Compliance Status: ____X____**IN** _____**OUT**
If OUT, provide explanation.

Comments: No comment.

Description of Facility Operations: This facility is a cell tower that has one (1) diesel-fired emergency power generator (Kohler Model 50REOZJC) with a power output of 37 kilowatts.

Review Status of Required Reports:
Include all reports reviewed since last AI report

Report Type (SAR, ACC, MACT, CM)	Timeframe Report Covers	Due Date	Received in CO	Received in EFO	Postmarked Date	Reviewed Date	Report Adequate (Y/N) if N, explain below	SL Report Tracking Number
n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a

Comments: No comment.

Visible Emissions Status/Evaluations:
All emission points observed and no visible emissions seen: ____X___**YES** _____**NO**

Source Number & Stack ID	Date of VEE	Limit/Method	Compliance Status (IN/OUT)
n/a	n/a	n/a	n/a

Comments about visible emissions observed if no VEE conducted: n/a

1) Permit Status:
For each permit used for this inspection, repeat items 1-5 to include details for each permit.

Permit Number	Source Number(s)	Issue/Amendment/Modification Date	Expiration Date	Next Application Due Date	Next Application Received Date
064189P	01	Issued 12/29/2010	12/28/2020	10/29/2020	n/a

Comments: No comment.

2) Mass Emission Limits:

Source Number	Permit Condition	Condition Limit	Maximum During Review Period
01	5	Particulate Matter ≤ 0.40 g/kW-hr (0.033 lb/hr)	N/A—Compliance based on power output and fuel type
01	8	Carbon Monoxide ≤ 5.0 g/kW-hr (0.41 lb/hr)	
01	9	Nitrogen Oxides ≤ 4.7 g/kW-hr (0.38 lb/hr)	

Comments: No comment.

3) Process Parameters (feed rates, input limits, work practice standards, etc.):

Source Number	Permit Condition	Condition Limit	Maximum During Review Period
01	2	The design rated power for this compression ignition engine (generator) is 37 kilowatts	N/A - Compliance method is not given
01	3	Fuel type: diesel only	Diesel was used
01	4	Operating time for nonemergency operation ≤ 100 hours/calendar year	14 hours of nonemergency operation recorded for 2012
01	6	Effective 10/1/2010: Diesel sulfur content ≤ 15 ppm and a minimum cetane index of 40 or a maximum cetane index of 35 volume percent	Diesel sulfur content was ≤ 15 ppm & a minimum cetane index of 40 or a maximum cetane index of 35 volume percent
01	11	A non-resettable hour meter must be installed on engine prior to start-up	A non-resettable hour meter was installed
01	13	Source shall operate & be maintained according to manufacturer's instructions or approval	N/A – Compliance method is not given

Comments: No comment.

4) Control Equipment Operating Parameters (flow rates, pressure drop, temperature, etc.):

Source Number	Permit Condition	Condition Limit	Value During On-Site Inspection	Compliance Maintained (Yes/No)
n/a	n/a	n/a	n/a	n/a

Comments: No comment.

5) On-Site Review of Facility Records and Operating Logs:

Source Number	Permit Condition	Type of Record/Log	Review Time Frame	Compliance (Yes/No)
01	4	Monthly, non-emergency operating hours log	8/2011-8/2013	No*
01	7	Fuel test data or fuel supplier statements	8/9/2011-8/9/2013	Yes

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Additional Information:

A copy of the Department's *Mercury-Added Product Disposal Requirements* was given to the facility for review: ___X___ YES _____ NO

Was any complaint received? _____ YES ___X___ NO
If YES, provide comments:

Has open burning occurred at this facility? _____ YES ___X___ NO
If YES, provide comments:

Was any stack testing required? _____ YES ___X___ NO
If YES, provide comments:

Was any stack testing performed? _____ YES ___X___ NO
If YES, provide comments:

Was there any air-related construction/modification? _____ YES ___X___ NO
If YES, provide comments:

Is any air-related construction/modification planned? _____ YES ___X___ NO
If YES, provide comments:

Are there any unpermitted and/or exempt sources (e.g., generators, stationary engines, boilers) that need further attention? _____ YES ___X___ NO
If YES, provide comments:

Patrick Nestal
Lead Inspector's Name

9/25/2013
Date

VEE Certification Number: 2484
Certification Expiration Date: 9/19/2013

I verify that the format and content of this report conforms to established TN Division of Air Pollution Control annual inspection standard operational procedures guidance and that the compliance determination made in this report is correct.

Jeff Cales
Supervisor/Manager

September 25, 2013
Date

PRV/56-0067 ai 2012-2013