



**HUMAN CREMATORY  
COMPLIANCE INSPECTION CHECKLIST**



**INSPECTION TYPE:** ANNUAL (INS1, INS2)  COMPLAINT/DISCOVERY (CI)   
 RE-INSPECTION (FUI)  ARMS COMPLAINT NO: \_\_\_\_\_

<b>FACILITY:</b> S.E. Cemeteries of Florida LLC		<b>DISTRICT:</b>
<b>DBA/Site Name:</b> <b>Bay Area Crematory</b>		Southwest
<b>ADDRESS:</b> 5862 Ulmerton Road Clearwater, FL		<b>CONTACT PHONE:</b> 531-8200
<b>ARMS NO:</b> 1030017 005	<b>PERMIT NO:</b> 1030017-006-AG	<b>Expiration Date:</b> 7/9/17 <b>Renewal Date:</b> 6/8/17 <b>Test Date:</b> 10/7/00

**EMISSION UNIT DESCRIPTION:** Human Crematory: B&L Systems, Inc. Phoenix II, 350 pound batch operated at 1,600 degree minimum secondary chamber temperature

<b>INSPECTION DATE:</b> 2/27/14	<b>INSPECTION COMPLIANCE STATUS (check <input type="checkbox"/> only one box)</b> <input checked="" type="checkbox"/> In Compliance; <input type="checkbox"/> Minor Non-Compliance; <input type="checkbox"/> Significant Non-Compliance
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**PART I: General Review:**

1.	Permit File Review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2.	Introduction and Entry <i>Comments: This emission unit was inspected to determine the annual compliance status. I met with the crematory manager, Ms. Sheila Kennedy for the inspection of the facility and emission unit.</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3.	Is the Authorized Representative still: <u>Mark Panter</u> ? <i>Comments: Mr. Panter stills the Authorized Representative.</i> The e-mail address is: mpanter@stei.com	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.	Is the facility contact still: William Wood? <i>Comments: Mr. Wood stills the facility contact.</i> The e-mail address is: mpanter@stei.com	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.	<b>If the answer to 3 or 4 is "No", did the facility provide an administrative update within 30 days?</b> [62-210.310(2)(d), F.A.C.]	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**PART II: TESTING REQUIREMENTS – Rule 62-296. 401(5), F.A.C.**

(check  appropriate box(es), if a shaded box is checked, this would indicate noncompliance)

**Compliance Demonstration [62-296.401(5)(h), F.A.C.]**

1.	<input type="checkbox"/> <b>New Facility</b> / <input type="checkbox"/> <b>New Process Equipment</b> — Did this facility demonstrate initial compliance no later than 30 days after beginning operation?-----	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.	<input checked="" type="checkbox"/> <b>Existing Facilities</b> Was an annual visible emissions compliance test conducted on each crematory unit for each calendar year: ----	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Test Reports</b>		
1.	Does the submitted visible emission test(s) demonstrate compliance with the 5 percent opacity, six-minute average, except that visible emissions not exceeding 15% opacity shall be allowed for up to six minutes in any one-hour period? [62-296.401(5)(b)1., F.A.C.]----- The last visible emission test resulted in an opacity of <u>0</u> % for the highest six minute average.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2.	Was the test conducted with the unit operating at a capacity of one (1) adult-sized cadaver? [62-296.401(5)(g)]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3.	Was the department notified at least 15 days prior to the test? [62-297.310(4)(a)9. F.A.C.]-----	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.	Was the required test report filed with the department as soon as practical, but no later than 45 days after the test was completed? [62-297.310(8)(b) -----	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PART II: TESTING REQUIREMENTS – Rule 62-296. 401(5), F.A.C.**  
 (check  appropriate box(es), if a shaded box is checked, this would indicate noncompliance)

5. Was the facility visible emissions test(s) conducted according to EPA Method 9? [62-297.401(9)(c), F.A.C.]-----  Yes  No
6. Was a visible emissions test(s) conducted by the inspector during this site visit according to EPA Method 9?-----  Yes  No  
 a) The visible emission test resulted in an opacity of \_\_\_% for the highest six minute average.  
 b) Did the test indicate the facility is operating in compliance with the opacity standard? -----  Yes  No
7. Is there any reason to ask for a special test to determine compliance with the PM and CO standards? -----  Yes  No

**PART III: OPERATING/RECORDKEEPING REQUIREMENTS**  
 (check  appropriate box(es), if a shaded box is checked, this would indicate noncompliance)

1. Were there any objectionable odor(s) detected? -----  Yes  No  
 An upwind/downwind survey of the facility was conducted. The observed parameters were:  
 Downwind odor level detected- 0 \_\_\_; Wind direction - N \_\_\_ Upwind odor level detected-0 \_\_\_ (1-10)
2. **Continuous Monitoring System** – [62-296.401(5)(i), F.A.C.]
- a) Is a continuous temperature monitoring system installed on each unit to record temperatures in the secondary chamber in accordance with the manufacturer’s instructions? -----  Yes  No
- b) Is the temperature probe properly placed, at least at the distance where the 1.0 second gas residence time at  1,800<sup>1</sup>  1,600<sup>2</sup> degrees was determined? -----  Yes  No
- c) Are the following records kept on file, available for inspection for at least two years following the recording of such measurements, maintenance, reports and records?
- 1) All temperature measurements -----  Yes  No
- 2) All continuous monitoring systems, monitoring devices, and performance testing measurements; monitoring system all continuous performance evaluations -----  Yes  No
- 3) All CEMS or monitoring device calibration checks (last performed on (9-9-13) ) -----  Yes  No
- 4) Adjustments -----  Yes  No
- 5) Preventive maintenance performed on systems/devices -----  Yes  No
- 6) Corrective maintenance performed on systems/devices -----  Yes  No
- 7) Are the temperature charts properly documented with operator name, operator indication of when cremation in the primary chamber was begun, date, time, and temperature markings -----  Yes  No
- 8) Are all the above records available for at least 2 years?-----  Yes  No  
 a) Date range for records reviewed: From: \_\_\_3-1-13\_\_\_ To: \_\_\_2/27/14\_\_\_
- 9) Was the crematory unit installed after 2/1/07? If yes, go to 9) a) – c)-----  Yes  No
- a) Is the crematory unit equipped and operated with a pollutant monitoring system to automatically control combustion based on continuous in-stack opacity measurement? -----  Yes  No
- b) Is the system calibrated to restrict combustion in the primary chamber whenever any opacity exceeds 15% opacity ? -----  Yes  No
- c) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer’s recommended maintenance schedule? -----  Yes  No
- 1 – Application received on or after 8/30/89; 2 – Application received prior to 8/30/89
3. Was this crematory unit application to construct: [62-296.401(5)(c), F.A.C.] (check only one  box)
- a)  **BEFORE** August 30, 1989? (If this box checked, continue on to #4 and skip #5)
- b)  **ON** or **AFTER** August 30, 1989? (If this box checked, skip #4 and continue on to #5)
4. If the application to construct was **BEFORE** August 30, 1989 is the:
- a) secondary chamber combustion zone providing at least a 1.0 second gas residence time @ 1600°F? -----  Yes  No
- b) actual operating temperature of the secondary chamber combustion zone no less than 1400°F throughout the combustion process in the primary chamber? -----  Yes  No
- c) cremation in the primary chamber begun after the secondary chamber combustion zone temperature is equal to or greater than 1400°F? -----  Yes  No
5. If the application to construct **ON** or **AFTER** August 30, 1989 is the:
- a) volume in the secondary combustion zone sufficient to provide at least a 1.0 second gas residence time @ 1800°F? -----  Yes  No
- b) actual operating temperature of the secondary chamber combustion zone no less than 1600°F throughout the combustion process in the primary chamber? -----  Yes  No
- c) secondary chamber combustion zone temperature equal to or greater than 1600°F before the cremation

**PART III: OPERATING/RECORDKEEPING REQUIREMENTS**

(check  appropriate box(es), if a shaded box is checked, this would indicate noncompliance)

process begins in the primary chamber? -----  Yes  No

- 6. Are appropriate cremation containers containing no more than 0.5 % (percent) by weight chlorinated plastics used during the cremation of dead human bodies, as demonstrated by MSD sheet? -----  Yes  No  
[62-296.401(5)(d), F.A.C.]
  - a) If the answer to question 6 above is YES, is certifying documentation from the manufacturer that they are composed of 0.5% or less by weight chlorinated plastics kept on file at the site for the duration of their use and for at least two years after their use? -----  Yes  No
  - b) Are there any other materials, including biomedical wastes (Rule 62-210.200, FAC) incinerated at this location? -----  Yes  No

**PART IV: Equipment Maintenance**

(check  appropriate box(es), if a shaded box is checked, this would indicate noncompliance)

**Equipment Maintenance:** – [62-296.401(5)(e), F.A.C.]

- 1. Is the crematory unit maintained in accordance with the manufacturer’s specifications? -----  Yes  No
- 2. Are there maintenance/repair/adjustment records kept onsite for at least 2 years? -----  Yes  No
- 3. Is there a written plan onsite which addresses the operating procedures during startup, shutdown and malfunction? -----  Yes  No
- 4. Does the crematory allow for a visible check on the flame characteristics?-----  Yes  No  
If yes go to a) – b)
  - a) Was the flame characteristic visually checked at least once during each operating shift?-----  Yes  No
  - b) Was the flame adjusted when necessary? -----  Yes  No

**PART V: Special Conditions And Procedures**

(check  appropriate box(es), if a shaded box is checked, this would indicate noncompliance)

**Administrative Changes:**

- 1. Were there any change in the name, address, or phone number of the facility or authorized representative not associated with a change in ownership or with a physical relocation of the facility or any emissions units or operations comprising the facility; or any other similar minor administrative change at the facility -----  Yes  No
- 2. If yes, did the facility provide written notification within 30 days of the change? [62-210.310(2)(d), F.A.C.] -----  Yes  No

**Permit Effective Period** – [62-210.310(3)(a), F.A.C.]

- 1. Is the general permit for this facility still within the 5 year effective period? -----  Yes  No
- 2. Did the facility submit the new re-registration form at least 30 days prior to permit expiration? -----  Yes  No

**New or Modified Process Equipment or Change in Ownership** - [62-210.310 (2)(b)2, F.A.C]

- C.. Since the last registration form submittal has there been
  - a) Installation of any new process equipment? - -----  Yes  No
  - b) Alterations to existing process equipment without replacement? -----  Yes  No
  - c) Replacement of existing equipment with equipment that is substantially different? -----  Yes  No
  - d) A change in ownership? -----  Yes  NoIf the any of the answers to 1a) – 1d) is **Yes** to any, a new registration form and appropriate fee should have been submitted 30 days prior to the change.-----  Yes  No

**Noncompliance Notice:** - [62-210.310(3)(i), F.A.C.]

- 1. Did the facility have any instances where they were unable comply with or will be unable to comply with any condition or limitation of the air general permit? -----  Yes  No  
If the answer is **Yes**, proceed to a) and b).
  - a) Did the owner or operator provide immediate notification to the Department? -----  Yes  No
  - b) Did the notification include: -----  Yes  No

1. A description of and cause of noncompliance?-----  Yes  No
2. Dates and times of noncompliance; or if not corrected, the anticipated time noncompliance is expected to continue and steps being taken to reduce, eliminate, and prevent recurrence of the noncompliance? -----  Yes  No

**PART VI: Comments**

An AQD VE test was not performed because the emission unit was not in operation.

Reviewed temperature charts for the months of 3/1/13 to 2/27/14.

Certifying documentation from the manufacturer that they are composed of 0.5% or less by weight chlorinated plastic was kept onsite. The emission unit was calibrated on 9/9/13, See attached calibration data sheets.

Exit Interview: During the closing conference, I informed Ms. Sheila Kennedy, facility appears to be in compliance at this time.

Mike Ojo Thomas \_\_\_\_\_

**Inspector's Name**

2-27-2014 \_\_\_\_\_

**Date of Inspection**

\_\_\_\_\_  
**Inspector's Signature**

\_\_\_\_\_  
**Approximate Date of Next Inspection**

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