



ANIMAL CREMATORY



COMPLIANCE INSPECTION CHECKLIST

INSPECTION TYPE: ANNUAL (INS1, INS2) [X] COMPLAINT/DISCOVERY (CI) [ ]
RE-INSPECTION (FUI) [ ] ARMS COMPLAINT NO:

FACILITY: Pinellas Memorial Gardens & Cremation Services
DBA/Site Name: Pinellas Park
ADDRESS: 6500 86th Avenue North
Pinellas Park, FL
ARMS NO: 1030129 003
PERMIT NO: 1030129-006-AG
DISTRICT: Southwest
CONTACT PHONE: 727 544-1051
Expiration Date: 6/12/2014
Renewal Date: 5/13/2014
Test Date: 6/15/2000

EMISSION UNIT DESCRIPTION: Animal Crematory: B&L Systems, Inc., Model BLP 500. Maximum Batch load is 500 lbs. Afterburner must operate at min. 1600 degrees F. 1 second residence time is determined at 18.6 feet. Equipped with an opacity monitor to automatically control combustion

INSPECTION DATE: 1/13/2013
INSPECTION COMPLIANCE STATUS (check one box)
[ ] In Compliance; [X] Minor Non-Compliance; [ ] Significant Non-Compliance

PART I: General Review:

- 1. Permit File Review [X] Yes [ ] No
2. Introduction and Entry [X] Yes [ ] No
Comments: Met w/ manager Travis Frost who provided me with documentation and answered questions.
3. Is the Authorized Representative still Dorothy Foster? [X] Yes [ ] No
Comments: The e-mail address is: kfoster35@tampabay.rr.com
4. Is the facility contact still Dorothy Foster? [X] Yes [ ] No
Comments: The e-mail address is: kfoster35@tampabay.rr.com
5. If the answer to 3 or 4 is "No", did the facility provide an administrative update within 30 days? [ ] Yes [X] No [62-210.310(2)(d), F.A.C.]

PART II: TESTING REQUIREMENTS - Rule 62-296.401(6), F.A.C.

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

Compliance Demonstration [62-296.401(6)(h), F.A.C.]

- 1. [ ] New Facility / [ ] New Process Equipment- Did this facility demonstrate initial compliance no later than 30 days after beginning operation? [ ] Yes [ ] No
2. [X] Existing Facilities Was an annual visible emissions compliance test conducted on each crematory unit for each calendar year? [X] Yes [ ] No
Test Reports
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(6)(b)1., F.A.C.] [X] Yes [ ] No
The last visible emission test resulted in an opacity of 0% for the highest six minute average.
2. Was the test conducted with the unit operating at a capacity that is representative of normal operations and is not greater than the manufacturer's recommended capacity? [62-296.401(6)(g)] [X] Yes [ ] No

**PART II: TESTING REQUIREMENTS – Rule 62-296.401(6), F.A.C.**  
 (check  appropriate box(es), if a shaded box is checked, this would indicate noncompliance)

3. Was the department notified at least 15 days prior to the test? [62-297.310(4)(a)9, F.A.C.]-----  Yes  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) -----  Yes  No
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 Method 9? -----  Yes  No  
 a) The visible emission test resulted in an opacity of 0% 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 - ENE Upwind odor level detected- 0 (1-10)
2. **Continuous Monitoring System** – [62-296.401(6)(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 6/25/10 for the chart recorder, 7/8/10 for the opacity monitor ) -----  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: 2/16/12 To: 1/9/13
- 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? (“from time to time”)----  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(6)(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

**PART III: OPERATING/RECORDKEEPING REQUIREMENTS**

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

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) the 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 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 animals, as demonstrated by MSD sheet? -----  Yes  No  
[62-296.401(6)(d), F.A.C.] See comments : **Unable to determine from the provided MSD.**

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, other than bedding, 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(6)(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 changes 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 prior to permit expiration? -----  Yes  No

**New or Modified Process Equipment or Change in Ownership**

C.. Since the last registration form submittal has there been [62-210.310 (2)(b)2, F.A.C

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  No

If the any of the answers to 1a) – 1)d) 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:  
1. A description of and cause of noncompliance?- -----  Yes  No
2. The period of noncompliance, including dates and times; or if not corrected, the anticipated time the noncompliance is expected to continue, and steps being taken to reduce, eliminate, and prevent recurrence of the noncompliance? -----  Yes  No

**PART VI: Comments**

Facility was well maintained. Maintenance records were complete, documented appropriately, and available for inspection. Temperature charts were made available for inspection and documentation was adequate.

During the review of temperature charts, there was an instance on the 9/11/12 temperature chart that was unclear about when the cremation began according to the chart documentation. A dip in temperature below 1600 appeared to occur after the documented time of the beginning the cremation (also appeared that a power failure may have caused it). Mr. Frost explained that he felt that the chart was documented wrong and that the cremation had not started before the dip in temperature occurred. I gave Mr. Frost a verbal warning to more clearly document the start of the cremation and to immediately notify our department if a temperature drop below 1600 degrees occurs followed by a written report.

The maintenance checks that the facility performs are documented on a manufacturer provided checklist. These records were complete and included repairs done. The incinerator manufacturer provided maintenance checklists do not exactly correspond with some of the frequencies of maintenance noted within the manufacturer’s operation manual.

The temperature chart was calibrated last on 6/25/10 by the manufacturer. The opacity monitor was calibrated and adjusted last on 7/8/10 by the manufacturer. The manufacturer recommendation indicates the frequency of this check to be “from time to time.”

A VE test was performed of a 150 lb batch load during the inspection. No emissions were observed during the 30 min test.

A brief power failure occurred at the facility during the inspection. The temperature briefly dropped below 1600 degrees and the operator performed the appropriate action bringing the temperature back up. Mr. Frost provided me immediate notification and hand delivered a written explanation before the end of the inspection.

I reviewed MSDS sheets provided for the plastic bags that are sometimes used in the cremations. One product MSDS that was provided contained information that stated 3,3’ Dichlorobenzidine may be present in the pigment but no percentage of chlorine was indicated. There was no MSDS provided for the entire bag but rather only the pigment portions of the bag with no clear definition of the chlorine content.

**Exit Interview:**

I informed Mr. Frost that it appears that the facility is in compliance with its General Permit however I may have to gather more information regarding the contents of the plastic bag.

After some further investigation from the office, I called the number provided for the facility contact on 1/15/13 and spoke with Helena Foster who stated that she would retrieve documentation from the manufacturer defining the chlorine content of the plastics as soon as possible.

On 1/28/13, Ms. Foster contacted the inspector and stated that her bag manufacturer was unable to determine the exact percentage of chlorine contained in the bag but she and the manufacturer felt confident the chlorine content was below the 0.5% limit. I looked closer at the MSD sheet provided for the bag(s) during the inspection and discovered that the MSD sheet was only for the pigments that are allegedly used in making the bag and no information about the plastic content was provided. There was no MSD sheet for the bag product itself kept on site. I contacted Ms. Foster via phone then emailed the rule requirements of 62-296.401(6) (d) and requested that she contact her manufacturer again to provide documentation required by the rule.

On 2/4/13 I received a phone call from Jeff C. at Versa Pak Inc. (419-586-5466). Jeff proceeded to inform me that there are no MSD sheets for any individual bag manufactured. He also stated that he was unable or unwilling to certify the exact percentage of chlorine contained in the bags used by the facility. I then requested that he provide the facility with the MSD for the plastic (polyethylene) component of the bag. The facility provided the polyethylene (not colored) MSD to me on 2/5/13.

With the documentation that has been provided, I am unable to determine the chlorine content of the bags. Therefore, it appears there is non-compliance with recordkeeping requirements found in 62-296.401(6)(d) stating

“...Containers shall contain no more than 0.5 percent by weight chlorinated plastics as demonstrated by the manufacturer’s data sheet. If containers are incinerated, documentation from the manufacturers certifying that they are composed of 0.5 percent or less by weight chlorinated plastics shall be kept on-file at the site for the duration of their use and for at least two (2) years after their use.”

Brennan Farrington

**Inspector’s Name**

1/13/13

**Date of Inspection**

**Inspector’s Signature**

~1/2014

**Approximate Date of Next Inspection**