

## <u>HUMAN CREMATORY</u> COMPLIANCE INSPECTION CHECKLIST



INSPECTION TYPE: ANNUAL (INS1, INS2) \( \) COMPLAINT/DISCOVERY (CI) \( \)						
RE-INSPECTION (FUI) ARMS COMPLAINT NO:						
FA	<b>ACILITY:</b> Pet Angel World Services,	LLC	DISTRICT:			
DE	BA/Site Name: Pet Angel World Me	emorial Center	Southwest			
ΑI	<b>DDRESS:</b> 6225 72nd Avenue No	orth	CONTACT PHONE:			
	Pinellas Park, FL	727-548-1456				
AF	RMS NO:	PERMIT NO:	<b>Expiration Date:</b>	xpiration Date: 10/1/2016		
	1030136 001	1030136-010-AG	Renewal Date:	8/31/2016		
	1030130 001	1030130-010-AG	Test Date:	12/12/2000		
<i>EMISSION UNIT DESCRIPTION:</i> Crawford Equipment & Engineering Company, Model C500P, serial #51711-A Animal Crematory. Fired on Natural Gas with a Maximum Heat Input of 1 MMBtu/hr. Maximum Batch Load Rate of 150 Pounds with a secondary chamber temperature of 1,400 degrees F.						
IN	SPECTION DATE:	INSPECTION COMPLIANCE STATUS (check \( \precedef \) only one box)				
Ģ	9/18/12		liance;   Significant N	Non-Compliance		
		PART I: General Review:				
1.	Permit File Review			⊠Yes □ No		
2. Introduction and Entry  Comments: This inspection was performed in order to determine if this facility has been operating within applicable regulations. Mr. Gilbert the Crematory Operator Supervisor was present during the facility inspection of the emission unit. He stated Ms. Sharon Martinache (Manager) on vacation.						
3.	Is the Authorized Representative str			⊠Yes □ No		
	Comments: Ms. Sharon Martinache					
4	The e-mail address is: sharon.martinache@petangelworldservices.com					
4.	Is the facility contact still: Sharon N			⊠Yes □ No		
	Comments: Ms. Sharon Martinache is still the facility contact.  The e-mail address is: sharon.martinache@petangelworldservices.com					
5.						
PART II: <u>TESTING REQUIREMENTS</u> – 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. New Facility / New Process Equipment—  Did this facility demonstrate initial compliance no later than 30 days after beginning operation? Yes No					
2.	_ 0	ance test conducted on each crematory unit for	each calendar year:	🛛 Yes 🔲 No		
	Test Reports  Does the submitted visible emission test(s) demonstrate compliance with the 5 percent opacity, sixminute 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.]——————————————————————————————————					
2.	Was the test conducted with the unit ope	rating at a capacity of one (1) adult-sized cada	ver? [62-296.401(5)(g)	] 🛛 Yes 🔲 No		
3.	Was the department notified at least 15 days prior to the test? [62-297.310(4)(a)9. F.A.C.] $\boxtimes$ Yes $\square$ No					
4.	Was the required test report filed with the department as soon as practical, but no later than 45 days after the					

PART II: <u>TESTING REQUIREMENTS</u> – Rule 62-296. 401(5), F.A.C.				
(check □ appropriate box(es), if a shaded box is checked, this would indicate noncompliance)				
	test was completed? [62-297.310(8)(b)	- 🛛 Yes	$\square$ 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	
	Was a visible emissions test(s) conducted by the inspector during this site visit according to EPA Method 9?a) The visible emission test resulted in an opacity ofn/a% for the highest six minute average.  b) Did the test indicate the facility is operating in compliance with the opacity standard?			
<i>7</i> .	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 $\square$ appropriate box(es), if a shaded box is checked, this would indicate noncompliance)	)		
1.	Were there any objectionable odor(s) detected?	$\square$ $Y_{es}$	$N_0$	
1.	An upwind/downwind survey of the facility was conducted. The observed parameters were:  Downwind odor level detected- 0; Wind direction - W Upwind odor level detected (1-10)	100	Z 110	
2.				
	a) Is a continuous temperature monitoring system installed on each unit to record temperatures in the	∇ V <sub>2g</sub>		
	secondary chamber in accordance with the manufacturer's instructions?	- 🔀 Yes	☐ No	
	time at $\Box 1,800^1 \ \boxtimes 1,600^2$ degrees was determined?	- 🛛 Yes	$\square$ 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 evaluations3) All CEMS or monitoring device calibration checks (last performed on <u>(6-24-10</u> )	- ⊠ Yes	$\square$ No No	
	4) Adjustments	- X Yes	$\bigcap_{No}^{No}$	
	5) Preventive maintenance performed on systems/devices	- X Yes	$\square$ No	
	6) Corrective maintenance performed on systems/devices	- 🛛 Yes	$\square$ No	
	7) Are the temperature charts properly documented with operator name, operator indication of	$\nabla V_{as}$	$\square$ No	
	when cremation in the primary chamber was begun, date, time, and temperature markings8) Are all the above records available for at least 2 years?	- 🖂 Yes	$\square$ No No	
	a) Date range for records reviewed: From: 8-1-11 To: 9-18-12			
	9) Was the crematory unit installed after 2/1/07? If yes, go to 9) a) - c)	- L Yes	$\bowtie$ 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	$\square$ 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 $\square$ box) a) $\boxtimes$ <u>BEFORE</u> August 30, 1989? (If this box checked, continue on to #4 and skip #5) b) $\square$ <u>ON</u> or <u>AFTER</u> August 30, 1989? (If this box checked, skip #4 and continue on to #5)			
4.	If the application to construct was <u>BEFORE</u> August 30, 1989 is the:			
	a) secondary chamber combustion zone providing at least a 1.0 second gas residence time @ 1600°F?b) actual operating temperature of the secondary chamber combustion zone no less than 1400°F		$\square$ No	
	throughout the combustion process in the primary chamber?	- 🛛 Yes	$\square$ No	
	c) cremation in the primary chamber begun after the secondary chamber combustion zone temperature	N 17		
	is equal to or greater than $1400^{\circ}F$ ?	- ⊠ Yes	☐ No	
5.	If the application to construct <u>ON</u> or <u>AFTER</u> 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?	$\Box V_{es}$	$\square$ No	
	b) actual operating temperature of the secondary chamber combustion zone no less than 1600°F	· 🔲 165		

2 of 3 Revised 05/08

PART III: OPERATING/RECORDKEEPING REQUIREMENTS					
(check □ appropriate box(es), if a shaded box is checked, this would indicate noncompliance)					
throughout the combustion process in the primary chamber?	Yes No				
c) secondary chamber combustion zone temperature equal to or greater than $1600^{\circ}F$ before the cremation process begins in the primary chamber?	\Bigcap Yes \Bigcap No				
process begins in the primary chamber:	I les I lvo				
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?	$\sim \times \times$				
[62-296.401(5)(d), F.A.C.]	100 100				
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 $\square$ appropriate box(es), if a shaded box is checked, this would indicate noncompliance	·a)				
	(e)				
<b>Equipment Maintenance:</b> – [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?	\( \sum \) Yes \( \sup \) No				
3. Is there a written plan onsite which addresses the operating procedures during startup,					
shutdown and malfunction?	X Yes No				
4. Does the crematory allow for a visible check on the flame characteristics?	\( \sum \) Yes \( \sup \) No				
If yes go to $a(b) = b(b)$	<b>~</b> □				
<ul><li>a) Was the flame characteristic visually checked at least once during each operating shift?</li><li>b) Was the flame adjusted when necessary?</li></ul>	Yes No				
b) Was the flame adjusted when necessary?	\( \tex \) 100				
PART V: Special Conditions And Procedures					
(check $\square$ appropriate box(es), if a shaded box is checked, this would indicate noncompliance	æ)				
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					
2. If yes, did the facility provide written notification within 30 days of the change? [62-210.310(2)(d), F.A.C.]					
<u>Permit Effective Period</u> – [62-210.310(3)(a), F.A.C.]					
1. Is the general permit for this facility still within the 5 year effective period?					
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?	\( \sum \) Yes \( \sum \) No				
If the any of the answers to $1a - 1$ d is <u>Yes</u> to any, a new registration form and appropriate fee should					
have been submitted 30 days prior to the change	Yes INO				
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 <b>Yes</b> , proceed to a) and b).	I				

3 of 3 Revised 05/08

a) Did the owner or operator provide immediate notification	to the Department? Yes No				
b) Did the notification include:	to the Department: 1 Tes 1 No				
2. Dates and times of noncompliance; or if not corrected, the					
and steps being taken to reduce, eliminate, and prevent reci					
ana sieps being laken to reduce, etiminate, and prevent rect	urrence of the noncompliance: 🗀 Tes 🔝 No				
PART VI: Comments					
The emission unit was not in operation at the time; therefore VE	test was not observed. Reviewed records for the months of				
8/1/11 through 9/18/12 indicted emission unit in compliance. The	e emission unit was last calibrated in 6/24/10. See an attached				
copies of the calibration temperature chart and record log.					
Exit Interview: During the closing conference, I informed Mr. Jason Gilbert the emission unit is deemed to be in compliance.					
Mike Ojo Thomas	9/18/12				
Inspector's Name	Date of Inspection				
Inspector's Signature	Approximate Date of Next Inspection				
H:\users\wpdocs\airqual\Air_Compliance\AQI\1030136 001 80					
11. length langer land dem land -combinance la 61/1020120 001 00	00#/140C				

4 of 3 Revised 05/08