| A AND |
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| FLORIDA |

HUMAN CREMATORY



COMPLIANCE INSPECTION CHECKLIST

| RE-INSPECTION (FUI) ARMS COMPLAINT NO: | |
|---|--|
| AIRS ID#: 1050179 DATE: 06/07/2007 ARRIVE: 12:45 DEPART: 2:12 | |
| FACILITY NAME: KERSEY FUNERAL HOME | |
| FACILITY LOCATION: 108 LAKE STELLA DRIVE | |
| AUBURNDALE 33823 | |
| | |
| RESPONSIBLE OFFICIAL: BRENT VON HORN PHONE: (813)225-4650 | |
| CONTACT NAME: Jonathan ReynoldsPHONE: (813)967-1167 | |
| REMITTANCE YEAR: ENTITLEMENT PERIOD: 11/3/2003 (11/3/2008 (end date)) / 11/3/2008 (end date) | |
| | |
| PART I: INSPECTION COMPLIANCE STATUS (check I only one box) | |
| IN COMPLIANCE IMINOR Non-COMPLIANCE SIGNIFICANT Non-COMPLIANCE | |
| | |
| | |
| PART II: <u>TESTING/RECORDKEEPING REQUIREMENTS</u> – Rule 62-296.401, F.A.C. | |
| (check ☑ appropriate box(es)) | |
| (check ☑ appropriate box(es)) 1. Were there any objectionable odor(s) detected? |]Yes 🛛 No |
| (check ☑ appropriate box(es)) 1. Were there any objectionable odor(s) detected? 2. Was a visible emissions test conducted during this site visit according to EPA Method 9 (Ref.: Chapter 62-297, F.A.C.)? |]Yes ⊠ No]Yes □ No |
| (check ☑ appropriate box(es)) 1. Were there any objectionable odor(s) detected? □ 2. Was a visible emissions test conducted during this site visit according to EPA Method 9 (Ref.: Chapter 62-297, F.A.C.)? □ 3. In order to demonstrate individual source compliance, was an annual visible emissions test conducted 60 days prior to the AGP Notification form submission, and within 60 days prior to each anniversary date? | |
| (check ☑ appropriate box(es)) 1. Were there any objectionable odor(s) detected? □ 2. Was a visible emissions test conducted during this site visit according to EPA Method 9 (Ref.: Chapter 62-297, F.A.C.)? □ 3. In order to demonstrate individual source compliance, was an annual visible emissions test conducted 60 days prior to the AGP Notification form submission, and within 60 days prior to each anniversary date? (Rule 62-296.401(5)(i), F.A.C.) □ | |
| (check ☑ appropriate box(es)) 1. Were there any objectionable odor(s) detected? | Yes No |
| (check ☑ appropriate box(es)) 1. Were there any objectionable odor(s) detected? | _Yes |
| (check ☑ appropriate box(es)) 1. Were there any objectionable odor(s) detected? | _Yes |
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| (check ☑ appropriate box(es)) 1. Were there any objectionable odor(s) detected? | _Yes |
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| (check ☑ appropriate box(es)) 1. Were there any objectionable odor(s) detected? | Yes No Yes No |
| (check d appropriate box(es)) 1. Were there any objectionable odor(s) detected? | Yes No |

PART III: <u>OPERATING/RECORDKEEPING REQUIREMENTS</u> – Rule 62-296.401, F.A.C. (check ☑ appropriate box(es))

| 1. Is there Continuous Emissions Monitoring System (CEMS) equipment installed on each unit to record to | | |
|--|-----------------|--|
| primary and secondary chambers where there is a 1.0 second gas residence time in the secondary chamber co | | |
| accordance with the manufacturer's instructions? | | |
| a) Do temperature probes seem to be properly placed? | | |
| b) Are the following records kept on file, available for inspection for at least two years following the red | cording of such | |
| measurements, maintenance, reports and records? | | |
| 1) All measurements (including CEMS) | 🛛 Yes 🗌 No | |
| 2) Monitoring device | 🖂 Yes 🗌 No | |
| 3) Performance Testing Measurements | 🛛 Yes 🔲 No | |
| 4) CEMS Performance Evaluation | 🛛 Yes 🗌 No | |
| 5) All CEMS or monitoring device calibration checks | 🛛 Yes 🗌 No | |
| 6) Adjustments | 🛛 Yes 🗌 No | |
| 7) Preventive maintenance performed on systems/devices | 🛛 Yes 🗌 No | |
| 8) Corrective maintenance performed on systems/devices | Yes 🗍 No | |
| 2. Was this crematory unit constructed: (check only one 🗹 box) | | |
| a) BEFORE August 30, 1989? (If this box checked, continue on to #3 and skip #4) | | |
| b) ON or AFTER August 30, 1989? (If this box checked, skip #3 and continue on to #4) | | |
| | | |
| 3. If constructed <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? | 🗌 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 | |
| d) required monitoring equipment installed and operational, and providing continuous monitoring to | | |
| record the temperature at the point or beyond where 1.0 second gas residence time is obtained in the | | |
| secondary chamber combustion zone according to the manufacturer's instructions? | Yes No | |
| , | | |
| 4. If constructed 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 tin | | |
| @ 1800° F? | 🛛 Yes 🗌 No | |
| b) the actual operating temperature of the secondary chamber combustion zone no less than $1600^{\circ}F$ | | |
| 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 crematic | n | |
| process begins in the primary chamber? | 🛛 Yes 🗌 No | |
| 5. Are appropriate cremation containers containing no more than 0.5 % (percent) by weight chlorinated | | |
| plastics used during the cremation of dead human bodies? | 🛛 Yes 🗌 No | |
| a) If the answer to question 4 above is YES, is certifying documentation from the manufacturer that the | y | |
| 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 | |
| 6. Have all crematory operators been trained and certified by a Department-approved training program? | Yes 🗍 No | |
| a) Are copies of the training certificates for all crematory operators kept on file at the facility for the duration | | |
| of the operator's employment & for an additional two years after termination of employment? | 🗌 Yes 🗌 No | |

PART IV: <u>SPECIAL CONDITIONS AND PROCEDURES</u> – Rule 62-296.401, F.A.C.

| A. <u>New or Modified Process Equipment</u> | | |
|--|------|------------|
| 1. Since the last inspection 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 substantially different than that noted on the most recent notification form? | Yes | — X No |
| d) If you answered <u>YES</u> to any of the above, did the owner submit a new and complete notification form and appropriate fee (Rule 62-4.050, F.A.C.) to the appropriate DEP or | | - |
| local program office? | □Yes | No |
| 2. If a crematory unit has been modified to the extent that a Department air construction permit | _ | _ |
| was required, have all operators been retrained to operate the modified unit? | Yes | No |
| 3. In the case of new or modified equipment, where a Department air construction permit was | | |
| required, has the owner submitted copies of all operator training certificates? | Yes | No |
| a) submitted within the 15 day required window following the training? | Yes | No |
| | | |

Joseph V. Panetta

Inspector's Name (Please Print)

Date of Inspection

06/07/2007

2008

Inspector's Signature

Approximate Date of Next Inspection

COMMENTS: Spoke with Jonathan Reynolds about new rules. Went over new rules explaining maintenance schedules and how the new January 10, 2007 Rule change addresses the operation of crematories according to manufacturer's specifications. Left him a copy of the new rules. Highlighted areas of rules we went over. Left examples of preventive schedules.

NOT OPERATING AT TIME OF INSPECTION

Explained that a complete file of all temperature measurements; all continuous monitoring system, monitoring device, and performance testing measurements; all continuous monitoring system performance evaluations; all continuous monitoring system or monitoring device calibration checks; and all adjustments, preventive maintenance, and corrective maintenance performed on these systems or devices, shall be recorded in a permanent legible form available for inspection. Continuous temperature monitoring documentation shall include operator name, operator indication of when cremation in the primary chamber was begun, date, time, and temperature markings. Pollutant monitoring system documentation shall include indication of when the opacity measurement system was cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule. The file shall be retained for at least two (2) years following the recording of such measurements, maintenance, reports, and records.

Viewed Records from March 1, 2007 to June 7, 2007

Explained allowed Materials. Human crematory units shall cremate only human or fetal remains with appropriate containers. The remains may be clothed. The containers shall contain no more than 0.5percent 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. No other material, including biomedical waste shall be incinerated..