

## **ANIMAL CREMATORY**



## COMPLIANCE INSPECTION CHECKLIST

| <b>INSPECTION TYPE</b> :   | ANNUAL (INS1, INS2)  | COMPLAINT/DISCOV  | /ERY (CI)  |   |           |
|--|--|---|--|---|-----------|
|  | RE-INSPECTION (FUI)  | ARMS COMPLAINT N  | NO:  |   |           |
| AIRS ID#: 0111026 DAT  | TE: <u>02/05/09</u>  | ARRIVE: <u>11:30</u>  | DEPART: <u>2:30</u>  |   |           |
| FACILITY NAME: HUI   | MANE SOCIETY OF BROWA  | ARD COUNTY  |  |   |           |
| FACILITY LOCATION  | 2070 GRIFFIN RD  |   |  |   |           |
|  | FORT LAUDERDALE  | 33312   |  |   |           |
| OWNER/AUTHORIZEI   | REPRESENTATIVE: CHE  | RISTOPHER AGOSTINO  | <b>PHONE:</b> (954)989-39  | 977   |           |
| CONTACT NAME: Bo   | b Ansel  | PHO   | NE:  |   |           |
| ENTITLEMENT PERIO  | PD: 7/18/2008 / 7/18/2013 (effective date) (end date)  | 3   |  |   |           |
|  |  |   |  |   |           |
| IN COMPLIANC   | COMPLIANCE STATUS (cl  | •   | ANT Non-COMPLIANCE   | l.  |           |
| DADT II. TESTING/DEA   | CORDKEEPING REQUIREN   | MENTS Dulo 62 206 401   | E A C  |   |           |
| (check <b>☑</b> appropriate  |  | <u>vien 15</u> – Ruie 02-290.401,   | r.A.C.   |   |           |
|  | ectionable odor(s) detected?<br>sions test conducted during this   |   |  | Yes   | ⊠ No      |
| 62-297, F.A.C.)?   | trate individual source complian   |   |  | Yes   | ⊠ No      |
| days prior to the A  | GP Notification form submissions.A.C.)   | on, and within 60 days prior t  | o each anniversary date? (1  | Rule<br>⊠Yes  | □ No      |
| 4. In order to demons  |  |   |  |   |           |
|  |  | nce were the remaining applic   |  | ⊠Yes  | □No       |
|  | 60 days prior to the AGP Notifi<br>de (CO) emissions equal to or b   | nce were the remaining appli-<br>ication form submission? (Rubelow the requirements of 10   | ale 62-210.300(4), F.A.C.) 0 parts per million by  | ⊠Yes  | □No       |
| volume, dry basis,<br>10 (Ref.: Chapter 6  | 60 days prior to the AGP Notifide (CO) emissions equal to or becorrected to $7\% O_2$ on an hourl $22-297$ , F.A.C.)?                | nce were the remaining appli-<br>ication form submission? (Rubelow the requirements of 10<br>by average basis and tested ac   | ale 62-210.300(4), F.A.C.) 0 parts per million by cording to EPA Method  | ⊠Yes  | ☐ No      |
| volume, dry basis,<br>10 (Ref.: Chapter 6<br>b) Oxygen test per<br>c) Particulate matt   | 60 days prior to the AGP Notifide (CO) emissions equal to or becorrected to 7% O <sub>2</sub> on an hourl (22-297, F.A.C.)?          | the contract the remaining application form submission? (Rubelow the requirements of 10 by average basis and tested action of 3 (Ref.: Chapter 62-297, qual to or below the requirements).  | ale 62-210.300(4), F.A.C.) 0 parts per million by cording to EPA Method F.A.C.)?ents of 0.080 grains per   | ⊠Yes  |           |
| volume, dry basis,<br>10 (Ref.: Chapter 6<br>b) Oxygen test per<br>c) Particulate matt<br>dry standard cubic<br>(Ref.: Chapter62-2   | 60 days prior to the AGP Notifide (CO) emissions equal to or becorrected to 7% O <sub>2</sub> on an hourl (22-297, F.A.C.)?          | the were the remaining application form submission? (Rubelow the requirements of 10 by average basis and tested actual actual (Ref.: Chapter 62-297, qual to or below the requirement of 7% O <sub>2</sub> and tested according   | ale 62-210.300(4), F.A.C.) 0 parts per million by cording to EPA Method F.A.C.)?ents of 0.080 grains per g to EPA Method 5   | ⊠Yes<br>⊠Yes  | ☐ No      |
| volume, dry basis,<br>10 (Ref.: Chapter 6<br>b) Oxygen test per<br>c) Particulate matt<br>dry standard cubic<br>(Ref.: Chapter62-2<br>5. Was all emissions to<br>capacity? | 60 days prior to the AGP Notifide (CO) emissions equal to or becorrected to 7% O <sub>2</sub> on an hourl (2-297, F.A.C.)?           | nce were the remaining application form submission? (Rubelow the requirements of 10 by average basis and tested actual actual actual to or below the requirements of 7% O <sub>2</sub> and tested according to 7% O <sub>2</sub> and tested according to the requirements of 10 by 10 | tle 62-210.300(4), F.A.C.) 0 parts per million by cording to EPA Method F.A.C.)?ents of 0.080 grains per g to EPA Method 5   | ⊠Yes<br>⊠Yes<br>- ⊠Yes<br>⊠Yes  | No No No  |
| volume, dry basis,<br>10 (Ref.: Chapter 6<br>b) Oxygen test per<br>c) Particulate matt<br>dry standard cubic<br>(Ref.: Chapter62-2<br>5. Was all emissions to<br>capacity? | 60 days prior to the AGP Notifi<br>de (CO) emissions equal to or becorrected to $7\%$ O <sub>2</sub> on an hourl<br>52-297, F.A.C.)? | the were the remaining application form submission? (Rubelow the requirements of 10 by average basis and tested action of 3 (Ref.: Chapter 62-297, qual to or below the requirement of 7% O <sub>2</sub> and tested according to the operating at the manufactural sission of a test report for an into the date of the last formal   | ale 62-210.300(4), F.A.C.) 0 parts per million by cording to EPA Method F.A.C.)?ents of 0.080 grains per g to EPA Method 5  urers recommended identical crematory unit? compliance test? | <ul><li>Yes</li><li>Yes</li><li>Yes</li><li>Yes</li><li>Yes</li><li>Yes</li><li>Yes</li><li>Yes</li></ul> | □ No □ No |

| PART III: OPERATING/RECORDKEEPING REQUIREMENTS – Rule 62-296.401, F.A.C.   |                 |            |
|--|-----------------|------------|
| (check <b>☑</b> appropriate box(es))   |                 |            |
| 1. Is there <b>Continuous Emissions Monitoring System</b> (CEMS) equipment installed on each unit to record to       | emperatu        | res in the |
| primary and secondary chambers where there is a 1.0 second gas residence time in the secondary chamber con           | mbustior        | zone in    |
| accordance with the manufacturer's instructions?   |                 |            |
| a) Do temperature probes seem to be properly placed?   |                 | □ No       |
| b) Are the following records kept on file, available for inspection for at least two years following the rec         |                 |            |
| measurements, maintenance, reports and records?  |                 |            |
| 1) All measurements (including CEMS)   | ⊠Yes            | ☐ No       |
| 2) Monitoring device   |                 | □ No       |
| 3) Performance Testing Measurements  |                 | □ No       |
| 4) CEMS Performance Evaluation   |                 | ☐ No       |
| 5) All CEMS or monitoring device calibration checks  |                 | □ No       |
| 6) Adjustments   |                 | □ No       |
| 7) Preventive maintenance performed on systems/devices   |                 | ☐ No       |
| 8) Corrective maintenance performed on systems/devices————————————————————————————————————                           | Yes             | ☐ No       |
| 2. Was this crematory unit constructed: (check only one ☑ box)   | Z 1 C3          |            |
| 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 <b>BEFORE</b> August 30, 1989 is the:  |                 |            |
| a) secondary chamber combustion zone providing at least a 1.0 second gas residence time @ <b>1600°F</b> ?            | □Yes            | □ No       |
| b) actual operating temperature of the secondary chamber combustion zone no less than <b>1400°F</b>                  |                 |            |
| throughout the combustion process in the primary chamber?  | ∏Yes            | □ No       |
| c) cremation in the primary chamber begun after the secondary chamber combustion zone temperature                    | 1 cs            |            |
| 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 <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 tim  @ 1800° F? |                 | □ Na       |
|  | ⊠Yes            | ∐ No       |
| b) the actual operating temperature of the secondary chamber combustion zone no less than 1600°F                     | N/10.           | □ N.       |
| throughout the combustion process in the primary chamber?  | ⊠Yes            | ☐ No       |
| c) secondary chamber combustion zone temperature equal to or greater than <b>1600°F</b> before the cremation         |                 |            |
| process begins in the primary chamber?   | ⊠Yes            | ∐ No       |
| 5. Are appropriate leak-proof containers containing no more than 0.5 % (percent) by weight chlorinated               | x,              |            |
| plastics used during the cremation of dead animals?  |                 | ∐ No       |
| a) If the answer to question 4 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) If plastic bags are used for the cremation of animals are they non-chlorinated and no less than 3 mils            | _               | _          |
| thick?   | Yes             | ☐ No       |
| c) Are dead animals, which have been used for medical or commercial experimentation, or other                        | _               |            |
| materials, including biomedical wastes (Rule 62-210.200, F.A.C.), incinerated at this location?                      | Yes             | ⊠ No       |
| 6. During this review period, was the largest batch load cremated 500 pounds per hour or less?                       | ∑Yes            | ☐ No       |
| 7. Have all crematory operators been trained and certified by a Department-approved training program?                | ⊠Yes            | ☐ No       |
| a) Are copies of the training certificates all crematory operators kept on file at the facility for the duratio      |                 |            |
| of the operator's employment & for an additional two years after termination of employment?                          | $\boxtimes$ Yes | ☐ No       |

| PART IV: <u>SPECIAL CONDITIONS AND PROCEDU</u> A. <u>New or Modified Process Equipment</u>   | <u>URES</u> – Rule 62-296.401, F.A.C.      |             |  |
|--|--|-------------|--|
| <ul> <li>b) alterations to existing process equipment with control of existing equipment substanting recent notification form?</li></ul> | installation of any new process equipment? |             |  |
| CPitters   | 02/05/2009                                 |             |  |
| Inspector's Name (Please Print)  | Date of Inspection                         | <del></del> |  |
|  |  |             |  |
|  | 02/05/2010                                 |             |  |