



# Florida Department of Environmental Protection

Northwest District Branch Office  
630-3 Capital Circle Northeast  
Tallahassee, Florida 32301

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary

July 10, 2008

SENT VIA E-MAIL  
[Culleysmeadowwood@yahoo.com](mailto:Culleysmeadowwood@yahoo.com)

Randy Stuart  
Culley's Meadowwood Funeral Home  
1737 Riggins Road  
Tallahassee, Florida 32308

Dear Mr. Stuart:

A Department representative inspected your facility to determine compliance with the Air Quality Operating Permit. The Air Program identification number for this facility is **0730042**. This letter applies only to activities covered by the Air Resource Management Program.

Based on the facility inspection results, the Tallahassee Branch Office reported a status of **In-Compliance** for your facility.

Note that your facility compliance status may be subject to further review by the District Program Office.

The assistance you provided is appreciated. You are encouraged to review the enclosed inspection checklist and its comments section. If you have any questions, your local contact is Tracy White at (850) 488-3704 or [tracy.a.white@dep.state.fl.us](mailto:tracy.a.white@dep.state.fl.us).

Sincerely,

Marlane Castellanos  
Branch Manager

MC/tw  
Enclosures

cc: Rick Bradburn, FDEP, Pensacola  
Mary Beth Curle, FDEP  
Erica Mitchell, FDEP



# HUMAN CREMATORY



## COMPLIANCE INSPECTION CHECKLIST

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

**AIRS ID#:** 0730042 **DATE:** 7/1/2008 **ARRIVE:** 10:00 **DEPART:** \_\_\_\_\_

**FACILITY NAME:** CULLEY'S MEADOWWOOD FUNERAL HOME

**FACILITY LOCATION:** 1737 RIGGINS RD  
TALLAHASSEE 32308

**OWNER/AUTHORIZED REPRESENTATIVE:** RANDY STUART **PHONE:** (904)355-5641

**CONTACT NAME:** **PHONE:**

**ENTITLEMENT PERIOD:** 9/4/2003 / 9/4/2008  
(effective date) (end date)

**PART I: INSPECTION COMPLIANCE STATUS** (check  only one box)

IN COMPLIANCE  MINOR Non-COMPLIANCE  SIGNIFICANT Non-COMPLIANCE

**PART II: TESTING/RECORDKEEPING REQUIREMENTS – Rule 62-296.401, F.A.C.**  
(check  appropriate box(es))

1. Were there any objectionable odor(s) detected?-----  Yes  No
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
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.)-----  Yes  No
4. In order to demonstrate individual source compliance were the remaining applicable standards testing completed within 60 days prior to the AGP Notification form submission? (Rule 62-210.300(4), F.A.C.)  Yes  No
  - a) Carbon Monoxide (CO) emissions equal to or below the requirements of 100 parts per million by volume, dry basis, corrected to 7% O<sub>2</sub> on an hourly average basis and tested according to EPA Method 10 (Ref.: Chapter 62-297, F.A.C.)?-----  Yes  No
  - b) Oxygen test performed according to EPA Method 3 (Ref.: Chapter 62-297, F.A.C.)?-----  Yes  No
  - c) Particulate matter emissions test with results equal to or below the requirements of 0.080 grains per dry standard cubic foot (ft<sup>3</sup>) of flue gas, corrected to 7% O<sub>2</sub> and tested according to EPA Method 5 (Ref.: Chapter 62-297, F.A.C.)?-----  Yes  No
5. Was all emissions testing conducted with the source operating at the manufacturers recommended capacity?-----  Yes  No
6. Was CO & PM compliance demonstrated by submission of a test report for an identical crematory unit?  Yes  No
7. Was the Department notified at least 15 days prior to the date of the last formal compliance test?-----  Yes  No
8. Was the required test report filed with the Department as soon as practical, but no longer than 45 days after the test was completed?-----  Yes  No

**PART III: OPERATING/RECORDKEEPING REQUIREMENTS – 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 temperatures in the primary and secondary chambers where there is a 1.0 second gas residence time in the secondary chamber combustion zone in accordance with the manufacturer's instructions?-----  Yes  No
  - a) Do temperature probes seem to be properly placed?-----  Yes  No
  - b) 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 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 **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
  - 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 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
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 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
6. Have all crematory operators been trained and certified by a Department-approved training program?
  - 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: SPECIAL CONDITIONS AND PROCEDURES – Rule 62-296.401, F.A.C.**

**A. New or Modified Process Equipment**

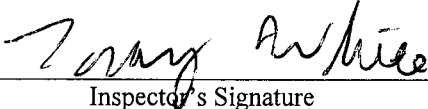
- 1. Since the last inspection has there been
  - a) installation of any new process equipment?-----  Yes  No
  - b) alterations to existing process equipment without replacement?-----  Yes  No
  - c) replacement of existing equipment substantially different than that noted on the most recent notification form?-----  Yes  No
  - d) If you answered **YES** 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

Tracy White

7/01/2008

Inspector's Name (Please Print)

Date of Inspection



Inspector's Signature

Approximate Date of Next Inspection

**COMMENTS:**

Contact on-site: George Hays, Crematory Operator.

I met with Mr. Hays. The unit was in operation, however it was being pre-heated for the insertion of a 200 pound body (not yet loaded). The body was in a particle board box. The temperature was approximately 1300 degrees and climbing. Mr. Hays appeared to be aware of proper pre-heating procedures. He showed me copies of all the certified operator certificates for the site.

Temperature chart records, time and date logs (2007-08) were available for inspection. All temperatures appeared to be in the proper range for incineration.

The cremation unit was a Power Pak II cremation system. No changes in equipment were noted.

The container was said to have a plastic liner and plastic shroud wrap/bag. I told Mr. Hays that all plastic used in the containers should have manufacture composition sheets.

No problems were noted. The facility appeared to be clean, odor and dust free. The last compliance test review was on 5/09/2008 and was in-compliance.

Email: Culleysmeadowwood@yahoo.com