OWNERINA PROTECTION	
Same Cart	
FLORIDA	

HUMAN CREMATORY



COMPLIANCE INSPECTION CHECKLIST

AIRS ID#: 0250537 DATE: 11/19/2009 ARRIVE: 10:53 AM DEPART: 11:25 AM FACILITY NAME: VAN ORSDEL FUNERAL CHAPEL DEPART: 0250537 DEPART: 0250537	
FACILITY LOCATION:3333 N E 2ND AVENUE	
MIAMI 33137	
OWNER/AUTHORIZED REPRESENTATIVE: DONALD VAN ORSDEL PHONE: (305)573-4310	
CONTACT NAME: PHONE:	
ENTITLEMENT PERIOD: 7/3/2008 / 7/2/2013 (effective date) (end date)	
PART I: INSPECTION COMPLIANCE STATUS (check ☑ only one box) ☑ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPLIANCE	
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PART II: <u>TESTING/RECORDKEEPING REQUIREMENTS</u> – Rule 62-296.401, F.A.C. (check ☑ appropriate box(es))	
1. Were there any objectionable odor(s) detected? I Yes X N)
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 □ Not	
 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_2 on an hourly average basis and tested according to EPA Method	
10 (Ref.: Chapter 62-297, F.A.C.)? b) Oxygen test performed according to EPA Method 3 (Ref.: Chapter 62-297, F.A.C.)? c) Particulate matter emissions test with results equal to or below the requirements of 0.080 grains per dry standard cubic foot (ft ³) of flue gas, corrected to 7% Os and tested according to EPA Method 5	
b) Oxygen test performed according to EPA Method 3 (Ref.: Chapter 62-297, F.A.C.)? Tyes Tyes	

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			
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 re	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		
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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	ne		
@ 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 crematic	on		
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	у		
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?	\boxtimes Yes \square No		
a) Are copies of the training certificates for all crematory operators kept on file at the facility for the du			
of the operator's employment & for an additional two years after termination of employment?	\square Yes \square 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	
1	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 <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? \Box Y	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? \Box	Yes 🗌 No
a) submitted within the 15 day required window following the training?	Yes No

FRANK DELGADO

Inspector's Name (Please Print)

11/19/2009

11/2010

Date of Inspection

Inspector's Signature

Approximate Date of Next Inspection

COMMENTS: BOTH CREMATORIES WERE OPERATIONAL AT THE TIME OF THE INSPECTION. I DID NOT OBSERVE ANY VISIBLE EMISSIONS. THERE IS A NEW CREMATORY OPERATOR ON SITE. HIS NAME IS NESTOR ALFARO. HE IS CERTIFY TO OPERATE BOTH CREMATORIES. THE TWO TEMPERATURE GRAPHS WERE OPERATIONAL AND FOUND UP-TO-DATE. ALL RECORDS WERE AVAILABLE. THE SECONDARY CHAMBER TEMPERATURES FOR UNIT #1 IS 1748 DEGREES F. AND FOR UNIT #2 IS 1638 DEGREES F.

THE TWO CREMATORIES ARE SERVICED EVERY TWO MONTHS.