

Florida Department of Environmental Protection

Northwest District Branch Office 3900 Commonwealth Boulevard, MS 55 Tallahassee, Florida 32399-3000 Rick Scott Governor

Jennifer Carroll Lt. Governor

Herschel T. Vinyard Jr. Secretary

September 7, 2012

SENT VIA EMAIL DKFCPALFD@aol.com

Mr. Dan K. Fairchild Chief Executive Officer Fairchild Cremation Services 3673 Peddie Drive Tallahassee, Florida 32303

Dear Mr. Fairchild:

A Department representative conducted two inspections for your facility to determine compliance with the Air Quality Operating Permit. The permit **expires July 31, 2013**. The program identification number for this facility is **0730068**. This letter applies only to activities covered by the Air Resources Management Program.

The Tallahassee Branch Office reported a status of **In Compliance** for your facility. Your compliance status may be subject to further review by the District Program Office.

Your assistance is appreciated. The inspection checklist is enclosed. If you have any questions, your local contact is Tracy White at (850) 245-2960 or by email at <u>tracy.a.white@dep.state.fl.us</u>.

Sincerely,

Clifford D. Wilson III, P.E. Northwest District Branch Administrator

CW/tw Enclosures

c: Rick Bradburn, Mary Beth Curle, Carol Melton (FDEP, Pensacola)

www.dep.state.fl.us



HUMAN CREMATORY



COMPLIANCE INSPECTION CHECKLIST

INSPECTION TYPE:	ANNUAL (INS1, INS2) RE-INSPECTION (FUI)		AINT/DISCOVER	Y (CI)		
AIRS ID#: 0730068 DA	TE: <u>8/08/2012</u>	ARRIVE:	<u>11:00 A.M.</u>	DEPART:		
FACILITY NAME: CA	APITAL CITY CREMATOR	Y				
FACILITY LOCATION	N: 3673 PEDDIE DR					
	TALLAHASSEE	32303				
OWNER/AUTHORIZE Email: dkfcpalfd@a CONTACT NAME: D Email: ENTITLEMENT PERIO	DAN FAIRCHILD	2013	Mobile:	(904)386-8686 (850)386-8686		
DADTL DEPECTION	Facility Section					
	N COMPLIANCE STATUS		_		NCE	
IN COMPLIAN	ICE MINOR Non-CO	JMPLIANCE	SIGNIFICAN	Г Non-COMPLIA	INCE	
PART II: <u>ONSITE INT</u>	RODUCTORY MEETING	<u>r</u>			(check ☑ ox for each	
1. Name(s) of facility rep	presentative(s): Dan Fairchil	<u>ld</u>		0		question
Brief Notes:						
2. Is the Authorized Rep If no, who is?:	resentative still DAN FAIRC	CHILD?			X Yes	No
If different, did the fac 3. Is the facility contact s If no, who is?:	cility provide an administrati still DAN FAIRCHILD?	ve update within 3	60 days?		☐ Yes ⊠ Yes	□No □No
4 W(11 C - 114 - 1 - 1		,				

Emissions Unit Section <u>1 – B&L SYSTEMS, MODEL N-20AA HUMAN CREMATORY</u>

PART I: FILE REVIEW PRIOR TO INSPECTION			only one
		box for each	question
1.	a. Complete AC application or, if no AC permit, initial GP registration received on or after August 30, 1989?	🛛 Yes	No
	b. If yes, were design calculations provided then to confirm a sufficient volume in the secondary chamber combustion zone to provide for at least a 1.0 second gas residence time		
	at 1800 degrees Fahrenheit? Crematory unit installed after February 1, 2007?	⊠ Yes □ Yes	□No ⊠No
	Date of last inspection: 8/09/2011		
4.	Past Visible Emissions (VE) tests:		
	a. Was a VE test performed within each of the past 4 calendar years?	Yes Yes	No
	b. Has a VE test been performed yet within the current calendar year?	🛛 Yes	No
	c. If first year of operation, was a VE test performed within 30 days of commencing operation? N/A	Yes	No
	d. Date of last VE test:		
	e. Was the VE test report filed with the compliance authority no later than 45 days after the test? f. Did the facility demonstrate compliance during the last VE test?		□No ⊠No
	If no, what was the problem (if known)? Opacity issues, retest ok.		
D 4]
PA	ART II: <u>VISIBLE EMISSIONS TESTING</u>	(check 🗹	only one
		box for each	question)
1	W	V Vac	
Ι.	Was a visible emissions test conducted by the facility for this unit during this site visit?		No
	a. Was the test conducted with the unit operating at a capacity of one adult-sized cadaver?		No
	b. Was the visible emissions test conducted according to EPA Method 9?	- 🖂 Yes	No
	c. The visible emission test resulted in an opacity of % for the highest six minute average.	N 1 7	
	d. Did the visible emission test demonstrate compliance with the limit?		No
	(5% opacity, six-minute average, except that visible emissions not exceeding 15% opacity shall be allowed for up to six minutes	s in any one-hour)	
n	With the second state of the state of the second state of the state of the second stat		
∠.	Was a visible emissions test conducted by the inspector during this site visit?		⊠No
	a. Was the test conducted with the unit operating at a capacity of one (1) adult-sized cadaver?	· _ res	No
	b. Was the visible emissions test conducted according to EPA Method 9? $\nabla x_{22} = \nabla x_{22}$		
	Yes		
	c. The visible emission test resulted in an opacity of % for the highest six minute average.		
1	d. Did the visible emission test demonstrate compliance with the limit?	- L Yes	No
3.	Is there any reason to ask for a special test to determine compliance with the PM and CO standa		No
	If what margan 9	Yes	INO
	If yes, what reason?		
PA	ART III: MONITORING/RECORDKEEPING REQUIREMENTS	(check 🗹	only one
		box for each	
		DOX 101 Cach	question
1.	Were there any objectionable odors detected?	- 🗌 Yes	🖾No
-	An upwind/downwind survey of the facility was conducted. The observed parameters were:		<u>K N</u>
	Downwind odor level detected- Wind direction - Upwind odor level detected-	(1-10)	
		()	
2.	Continuous Monitoring Systems –		
	Is a continuous temperature monitoring system installed on each unit to record temperatures in the		
•	secondary chamber in accordance with the manufacturer's instructions?	Yes	No
h	Is the temperature probe properly placed, at least at the distance where the 1.0 second gas residence		
U	time at $\ge 1,800^1$ \square 1,600 ² degrees was determined?	X Yes	No
	(Application or initial notification: ¹ received on or after $8/30/89$; ² received before $8/30/89$)		

PART III: MONITORING/RECORDKEEPING REQUIREMENTS (continued)

c.	Are the following records kept on file, available for inspection, for at least the past two years?		
	1) All temperature measurements	X Yes	No
	2) all continuous monitoring systems, monitoring devices, and performance testing measurements;		
	monitoring system all continuous performance evaluations	🖂 Yes	No
	3) All CEMS or monitoring device calibration checks (last performed on (8/08/12)	Yes	L.No
	4) Adjustments	Yes Yes	No
	5) Preventive maintenance performed on systems/devices	🖂 Yes	No
	6) Corrective maintenance performed on systems/devices	🖂 Yes	No
d.	Are the temperature charts properly documented with operator name, operator indication of		
	when cremation in the primary chamber was begun, date, time, and temperature markings	X Yes	No
e.	Was the crematory unit installed after $2/1/07$? If no, skip e.(1) – (3)	Yes	🖾No
	(1) Is the crematory unit equipped and operated with a pollutant monitoring system to automatica	lly	_
	control combustion based on continuous in-stack opacity measurement?	Yes	No
	(2) Is the system calibrated to restrict combustion in the primary chamber whenever any opacity		
	exceeds 15% opacity ?	🗌 Yes	No
	(3) Has the opacity measurement system been cleaned and checked for proper operation in		
	accordance with the manufacturer's recommended maintenance schedule?	Yes	No

PART IV: SECONDARY COMBUSTION ZONE TEMPERATURES			only one question)
1.	 If the application to construct was <u>BEFORE</u> August 30, 1989 is the: a. actual operating temperature of the secondary chamber combustion zone no less than 1400°F throughout the combustion process in the primary chamber?		□No
2.	 If the application to construct <u>ON</u> or <u>AFTER</u> August 30, 1989 is the: a. the actual operating temperature of the secondary chamber combustion zone no less than 1600°F throughout the combustion process in the primary chamber? b. secondary chamber combustion zone temperature equal to or greater than 1600°F before the cremation of the secondary chamber combustion zone temperature equal to or greater than 1600°F before the cremation of the secondary chamber combustion zone temperature equal to or greater than 1600°F before the cremation of the secondary chamber combustion zone temperature equal to or greater than 1600°F before the cremation of the secondary chamber combustion zone temperature equal to or greater than 1600°F before the cremation of the secondary chamber combustion zone temperature equal to or greater than 1600°F before the cremation of the secondary chamber combustion zone temperature equal to or greater than 1600°F before the cremation of the secondary chamber combustion zone temperature equal to or greater than 1600°F before the cremating temperature equal to conduct the combustion zone temperatur	ion	No
	process begins in the primary chamber?	🛛 Yes	No

PART V: <u>ALLOWED MATERIALS</u>		(check $\mathbf{\nabla}$ box for each	5
1.	<i>Other than</i> human or fetal remains with appropriate containers or clothing, are any materials, including biomedical wastes, incinerated in the unit?	Yes	XNo
2.	Do cremation containers contain no more than 0.5 % (percent) by weight chlorinated plastics as certified by the manufacturer?		□No □No

PART VI: <u>EQUIPMENT MAINTENANCE</u>	(check ☑ box for each	-
1. Is the crematory unit maintained in accordance with the manufacturer's specifications?	- 🛛 Yes	No
2. Is there a written plan onsite which addresses the operating procedures during startup, shutdown and malfunction?	- 🛛 Yes	No
3. Does the crematory allow for a visible check on the flame characteristics? If no, skip a. – b.	- 🗌 Yes	🖾No
a. Was the flame characteristic visually checked at least once during each operating shift? b. Was the flame adjusted when necessary?		□No □No

PART VII: <u>EU INSPECTIO</u>	N COMPLIANCE STATUS (check	\checkmark only one box)
IN COMPLIANCE	MINOR Non-COMPLIANCE	SIGNIFICANT Non-COMPLIANCE

Facility Section (continued)

SPECIAL CONDITIONS AND PROCEDURES	(check ☑ box for each	only one question)
Administrative Changes:		
 Were there any changes in the name, address, or phone number of the facility or authorized representat associated with a change in ownership or with a physical relocation of the facility or any emissions uni operations comprising the facility; or any other similar minor administrative change at the facility? If yes, did the facility provide written notification within 30 days of the change?	ts or Ves	⊠No □No
New or Modified Process Equipment or Change in Ownership:		
 3. Since the last registration form submittal has there been	· 🗌 Yes	□No □No □No □No □No

Tracy White

Inspector's Name (Please Print)

8/08/2012 Date of Inspection

I may where

Inspector's Signature

Approximate Date of Next Inspection

COMMENTS: I met with Dan Fairchild. Mr. Fairchild had the crematory secondary temperature at approximately 1600 degrees F. or greater. I checked the temperature chart records. Records were maintained.

Mr. Henry Hernandez arrived to perform the VE test. The first test run commenced. I observed the first test run for approximately 20 minutes. I did not note any excess emissions. My observations appeared to correspond with the VE reader's recorded data.

No issues were noted. No changes to equipment were noted. No objectionable odor was noted.