

## **ANIMAL CREMATORY**



## COMPLIANCE INSPECTION CHECKLIST

INSPECTION TYPE: ANNUAL (INS1, RE-INSPECTION		· · · —							
AIRS ID#: 0990300 DATE: <u>12/21/2012</u>	ARRIVE: <u>10:05</u>	DEPART: <u>10:45</u>							
FACILITY NAME: BELVEDERE ANIMAL CARE & CONTROL FACILITY									
FACILITY LOCATION: 7100 BELV	VEDERE RD								
WEST PAL	LM BEACH 33411								
OWNER/AUTHORIZED REPRESENTATE  Email: jchesher@co.pal-beach.fl.us  CONTACT NAME:  Email:  ENTITLEMENT PERIOD: 1/7/2008 /  (effective date)	Mo PH	HONE: (561)233-0266 obile: HONE: obile:							
Facility Section  PART I: INSPECTION COMPLIANCE STATUS (check ☑ only one box)  ☑ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPLIANCE									
PART II: ONSITE INTRODUCTORY ME  1. Name(s) of facility representative(s): Rob  Brief Notes:		(check ☑ only one box for each question)							
2. Is the Authorized Representative still JOH If no, who is?:	IN CHESHER?								
If different, did the facility provide an adn  3. Is the facility contact still? If no, who is?: Robert Federick									
4. Will facility be conducting VE test(s) duri If yes, was the compliance authority notifi									

## **Emissions Unit Section 1-ANIMAL CREMATORY**

PA	RT I: FILE REVIEW PRIOR TO INSPECTION	(check <b>only</b> 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?	Yes	No
3. 4.	Manufacturer's recommended capacity: 600 ☐ lbs for batch unit ☐ lbs/hr for ram-charged unit.  Crematory unit installed after February 1, 2007?  Date of last inspection: 12/29/2011  Past Visible Emissions (VE) tests:	Yes	□No
٥.	a. Was a VE test performed within each of the past 4 calendar years? b. Has a VE test been performed yet within the current calendar year? c. If first year of operation, was a VE test performed within 30 days of commencing	⊠ Yes □ Yes	□No ⊠No
	operation? N/A d. Date of last VE test: 12/29/2011	☐ Yes	□No
	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?  If no, what was the problem (if known)?	<ul><li>∑ Yes</li><li>∑ Yes</li></ul>	□No □No
PA	ART II: <u>VISIBLE EMISSIONS TESTING</u>	(check 🗹 box for each	only one question)
a. (b. c. d. e. (	Was a visible emissions test conducted by the facility for this unit during this site visit? Operating capacity during test? 1398 ☑ lbs for batch unit ☐ lbs/hr for ram-charged unit Was the operating capacity greater than the manufacturer's recommended capacity?	<ul><li>✓ Yes</li><li>✓ Yes</li><li>✓ Yes</li><li>✓ Yes</li></ul>	□No □No □No □No
Ι. Ι	Did the visible emission test demonstrate compliance with the limit? (5% opacity, six-minute average, except that visible emissions not exceeding 15% opacity shall be allowed for up to six minutes	Yes in any one-hour)	□No
a. (b. c. d. e. 'f. I	Was a visible emissions test conducted by the inspector during this site visit?	Yes Yes s in any one-hour)	<ul><li>No</li><li>No</li><li>No</li><li>No</li><li>No</li></ul>
	Is there any reason to ask for a special test to determine compliance with the PM and CO standar  If yes, what reason?	ds? Yes	⊠No
•	11 yes, what reason:		

PA	ART III: MONITORING/RECORDKEEPING REQUIREMENTS		only one
		box for each	question)
1.	Were there any objectionable odors detected?	☐ Yes	⊠No
	An upwind/downwind survey of the facility was conducted. The observed parameters were:		
	Wind direction - <u>NW</u> Downwind odor level detected- <u>1</u> Upwind odor level detected- <u>1</u> Scale: 1-10	(worst)	
2.			
a	Is a continuous temperature monitoring system installed on each unit to record temperatures in the	N 17	
 	secondary chamber in accordance with the manufacturer's instructions?	⊠ Yes	□No
b	Is the temperature probe properly placed, at least at the distance where the 1.0 second gas residence time at $\boxtimes 1,800^1$ $\square 1,600^2$ degrees was determined?	Yes	□No
	(Application or initial notification: <sup>1</sup> received on or after 8/30/89; <sup>2</sup> received before 8/30/89)	Z 103	
c.	Are the following records kept on file, available for inspection, for at least the past two years?		
	(1) All temperature measurements(2) All continuous monitoring systems, monitoring devices, and performance testing measurements;	⊠ Yes	□No
	monitoring system all continuous performance evaluations	- X Yes	□No
	(3) All CEMS or monitoring device calibration checks (last performed on 9/2012)		□\0
	(4) Adjustments	⊠ Yes	□No
	(5) Preventive maintenance performed on systems/devices	Yes	□No
	(6) Corrective maintenance performed on systems/devices	Xes	□No
d	Are the temperature charts properly documented with operator name, operator indication of		
u.	when cremation in the primary chamber was begun, date, time, and temperature markings	⊠ Yes	□No
e.	Was the crematory unit installed <b>after <math>2/1/07</math>?</b> If no, skip e.(1) – (3)	⊠ Yes	□No
	(1) Is the crematory unit equipped and operated with a pollutant monitoring system to automatic		
	control combustion based on continuous in-stack opacity measurement?		□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?	X Yes	□No
		(check 🗹	only one
PA	ART IV: SECONDARY COMBUSTION ZONE TEMPERATURES	box for each	question)
1.	If the application to construct was <b>BEFORE</b> August 30, 1989 is the:		
	a. 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
	b. secondary chamber combustion zone temperature equal to or greater than <b>1400°F</b> before the cremat		□No
	process begins in the primary chamber?	Yes	□No
_			
2.	If the application to construct <b>ON</b> or <b>AFTER</b> August 30, 1989 is the:		
	a. the actual operating temperature of the secondary chamber combustion zone no less than <b>1600°F</b> throughout the combustion process in the primary chamber?	⊠ Yes	□No
	b. secondary chamber combustion zone temperature equal to or greater than <b>1600°F</b> before the cremat		
	process begins in the primary chamber?	⊠ Yes	□No
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PA	ART V: <u>ALLOWED MATERIALS</u>	box for each	question)
1	Besides animal remains and, if applicable, the bedding associated with the animals and appropriate con	ntainers	
1.	are any other materials, including biomedical wastes, incinerated in the unit?	Yes	⊠No
	If yes, what other materials?		
	· ·		
2.	Do containers contain no more than 0.5 percent by weight chlorinated plastics		
2.	Do containers contain no more than 0.5 percent by weight chlorinated plastics as certified by the manufacturer?	Yes Yes	⊠No □ No

PART VI: EQUIPMENT MAINTENANCE		(check 🗹 box for each	only one question)			
<ul> <li>2. Is there a written plan onsite which addresses the shutdown and malfunction?</li> <li>3. Does the crematory allow for a visible check on If no, skip a. – b.</li> <li>a. Was the flame characteristic visually checked</li> </ul>	the flame characteristics?	⊠ Yes ⊠ Yes	No  No  No  No			
☐ IN COMPLIANCE ☐ MINOR Non-	COMPLIANCE SIGNIFICANT Non-COMPL	JANCE				
Fa	Facility Section (continued)					
SPECIAL CONDITIONS AND PROCEDURES		(check 🗹 box for each				
associated with a change in ownership or with a operations comprising the facility; or any other s  2. If yes, did the facility provide written notification of New or Modified Process Equipment or Change in C  3. Since the last registration form submittal has the a. Installation of any new process equipment b. Alterations to existing process equipment c. Replacement of existing equipment with d. A change in ownership?	phone number of the facility or authorized representate physical relocation of the facility or any emissions unissimilar minor administrative change at the facility? n within 30 days of the change?  Ownership:  The been  In without replacement?  In new registration form and the appropriate fee	ts or Yes Yes Yes Yes Yes Yes Yes	<ul><li>No</li><li>No</li><li>No</li><li>No</li><li>No</li><li>No</li><li>No</li><li>No</li><li>No</li><li>No</li></ul>			
Patricia Tampas  Inspector's Name (Please Print)	12/21/2012  Date of Inspection 12/21/2013					
Inspector's Signature	Approximate Date of Next Insp	pection				
COMMENTS: Witnessed VE test and record review	ew.					