

HUMAN CREMATORY



COMPLIANCE INSPECTION CHECKLIST

INSPECTION TYPE: ANNUAL (INS1, INS2) ☐ COMPLAINT/DISCOVERY (CI) ☐]
RE-INSPECTION (FUI) ARMS COMPLAINT NO:	
AIRS ID#: 0150031 DATE: 11/08/2007 ARRIVE: 09:40 A.M. DEPA	RT: <u>11:25 A.M.</u>
FACILITY NAME: ROBERSON FUNERAL HOME	
FACILITY LOCATION: 2151 TAMIAMI TRAIL	
PORT CHARLOTTE 33952	
RESPONSIBLE OFFICIAL: KENNETH ROBERSON PHONE: (941)629-	3141
CONTACT NAME: PHONE:	
	/6/2008 d date)
PART I: INSPECTION COMPLIANCE STATUS (check ☑ only one box)	
IN COMPLIANCE MINOR Non-COMPLIANCE SIGNIFICANT Non-COL	MPLIANCE
PART II: TESTING/RECORDKEEPING REQUIREMENTS – Rule 62-296.401, F.A.C. (check appropriate box(es))	MPLIANCE
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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 Chapter Yes No Yes No Yes No No No Stesting Yes No Yes No Yes No Yes No Yes No Yes No Stesting
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PART III: OPERATING/RECORDKEEPING REQUIREMENTS – Rule 62-296.401, F.A.C. (check ☑ appropriate box(es))	
1. Is there Continuous Emissions Manitaring System (CEMS) equipment installed on each unit to record	tamparaturas in tha
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 continuous.	emperatures in the
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	
3) Performance Testing Measurements	
4) CEMS Performance Evaluation	
5) All CEMS or monitoring device calibration checks	
	⊠Yes ∐ No
7) Preventive maintenance performed on systems/devices	
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	ne
@ 1800° F?	☐Yes ☐ No
b) the actual operating temperature of the secondary chamber combustion zone no less than 1600°F	
	□Yes □ No
c) secondary chamber combustion zone temperature equal to or greater than 1600°F before the crematic	
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	
are composed of 0.5% or less by weight chlorinated plastics kept on file at the site for the duration of	f
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?	Yes 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?	Yes No
of the operator 3 employment & for an additional two years after termination of employment?	

PART IV: <u>SPECIAL CONDITIONS AND PROCEDURES</u> A. <u>New or Modified Process Equipment</u>	<u>S</u> – Rule 62-296.401, F.A.C.	
1. Since the last inspection has there been	□xy NZhy	
a) installation of any new process equipment?b) alterations to existing process equipment without		
c) replacement of existing equipment substantially recent notification form?	different than that noted on the most	
d) If you answered YES to any of the above, did the	ne owner submit a new and complete	
notification form and appropriate fee (Rule 62-4 local program office?		
2. If a crematory unit has been modified to the extent the		
was required, have all operators been retrained to op 3. In the case of new or modified equipment, where a D		
required, has the owner submitted copies of all opera		
a) submitted within the 15 day required window fol		
	44/00/0005	
ROBERT J. STEWART	11/08/2007	
Inspector's Name (Please Print)	Date of Inspection	
	11/2008	
Inspector's Signature	Approximate Date of Next Inspection	
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COMMENTS: V.E. test conducted with O% opacity (six minute average) observed for 60 minute test (See attached V.E. Test Form).