

EPA VISIBLE EMISSION OBSERVATION FORM 1

Method Used (Circle One)
 Method 9 203A 203B Other: _____

Form Number _____ Page 1 of 2
 Continued on VEO Form Number _____

Company Name ROBERSON FUNERAL HOME
 Facility Name # 0150031
 Street Address 2151 TAMiami TRAIL
 City Port Charlotte State FL Zip _____

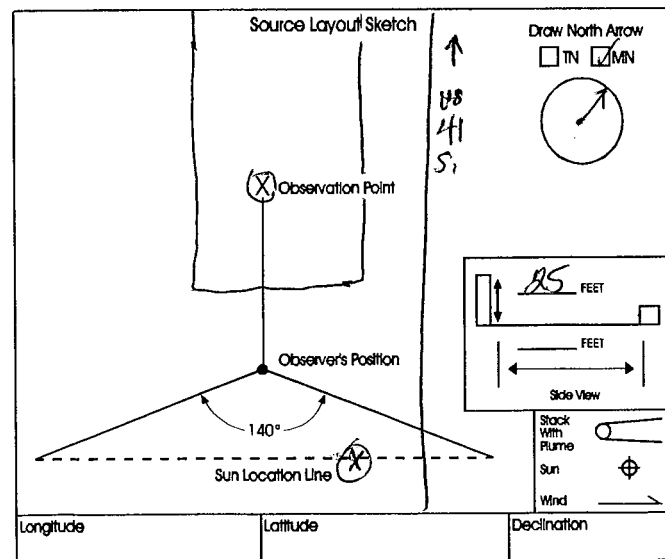
Process HUMAN CREMATION Unit # _____ Operating Mode 150lbs
 Control Equipment AFTER BURNER Operating Mode 1650°F

Describe Emission Point
SILVER STACK ON middle west roof of building
 Height of Emiss. Pt. Start ~25' End ~25' Height of Emiss. Pt. Rel. to Observer Start ~25' End ~25'
 Distance to Emiss. Pt. Start ~120' End ~120' Direction to Emiss. Pt. (Degrees) Start 320 End 320

Vertical Angle to Obs. Pt. Start ~8° End ~8° Direction to Obs. Pt. (Degrees) Start ~320° End ~320°
 Distance and Direction to Observation Point from Emission Point Start N/A End N/A

Describe Emissions
 Start NONE End NONE
 Emission Color Start N/A End N/A Water Droplet Plume Attached Detached None

Describe Plume Background
 Start SKY End SKY
 Background Color Start BLUE End BLUE Sky Conditions Start BROKEN End BROKEN
 Wind Speed mph Start 1.6 Avg End 3.5 mph Wind Direction Start SW-S End S-SW
 Ambient Temp. Start 78°F End 84°F Wet Bulb Temp. _____ RH Percent 69%



Additional Information
Approx. 150 lbs body (HUMAN REMAINS)
cremated

Observation Date	Time Zone	Start Time	End Time	Comments					
4/18/12	EST	9:32AM	10:32AM	Sec	0	15	30	45	
1	0	5	5	0					
2	0	0	0	5					
3	0	0	5	0					
4	0	0	0	0					
5	0	0	0	0					
6	0	0	0	0					
7	0	0	0	0					
8	0	0	0	0					
9	0	0	0	0					
10	0	0	0	0					
11	0	0	0	0					
12	0	0	0	0					
13	0	0	0	0					
14	0	0	0	0					
15	0	0	0	0					
16	0	0	0	0					
17	0	0	0	0					
18	0	0	0	0					
19	0	0	0	0					
20	0	0	0	0					
21	0	0	0	0					
22	0	0	0	0					
23	0	0	0	0					
24	0	0	0	0					
25	0	0	0	0					
26	0	0	0	0					
27	0	0	0	0					
28	0	0	0	0					
29	0	0	0	0					
30	0	0	0	0					

Observer's Name (Print) Robert J. Stewart
 Observer's Signature Robert J Stewart Date 4/18/12
 Organization FDEP
 Certified By E.T.A. Date 2/15/12

EPA VISIBLE EMISSION OBSERVATION FORM 1

Method Used (Circle One)
 Method 9 203A 203B Other: _____

Form Number Page 2 Of 2
 Continued on VEO Form Number _____

Company Name **Roberson FUNERAL Home**
 Facility Name **# 0150031**
 Street Address _____
 City **Port Charlotte** State _____ Zip _____

Process _____ Unit # _____ Operating Mode _____
 Control Equipment _____ Operating Mode _____

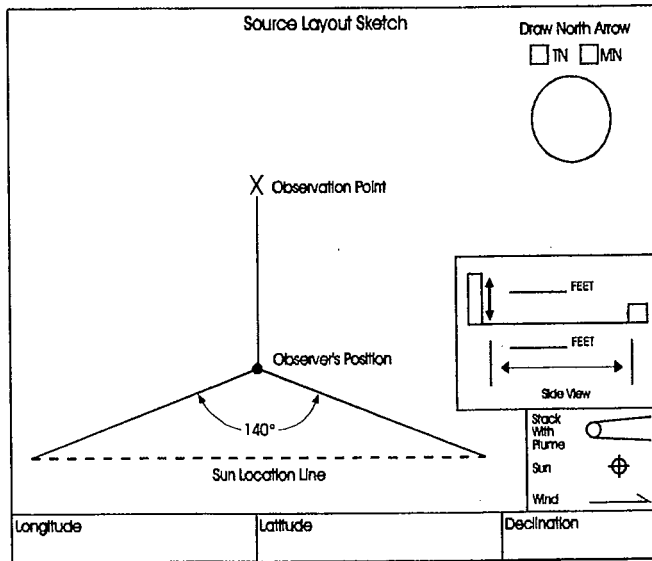
Describe Emission Point

Height of Emiss. Pt. _____ Height of Emiss. Pt. Rel. to Observer _____
 Start _____ End _____ Start _____ End _____
 Distance to Emiss. Pt. _____ Direction to Emiss. Pt. (Degrees) _____
 Start _____ End _____ Start _____ End _____

Vertical Angle to Obs. Pt. _____ Direction to Obs. Pt. (Degrees) _____
 Start _____ End _____ Start _____ End _____
 Distance and Direction to Observation Point from Emission Point _____
 Start _____ End _____

Describe Emissions
 Start _____ End _____
 Emission Color _____ Water Droplet Plume _____
 Start _____ End _____ Attached Detached None

Describe Plume Background
 Start _____ End _____
 Background Color _____ Sky Conditions _____
 Start _____ End _____ Start _____ End _____
 Wind Speed _____ Wind Direction _____
 Start _____ End _____ Start _____ End _____
 Ambient Temp. _____ Wet Bulb Temp. _____ RH Percent _____
 Start _____ End _____



Observation Date		Time Zone				Start Time	End Time
4/18/12		EST					10:32AM
Min	Sec	0	15	30	45	Comments	
	1	0	0	0	0		0
2	0	0	0	0	0		
3	0	0	0	0	0		
4	0	0	0	0	0		
5	0	0	0	0	0		
6	0	0	0	0	0		
7	5	0	0	0	0		
8	0	0	0	0	0		
9	0	0	0	0	0		
10	0	0	0	0	0		
11	0	0	0	0	0		
12	0	0	0	0	0		
13	0	0	0	0	0		
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25	0	0	0	0	0		
26	0	0	0	0	0		
27	0	0	0	0	0		
28	0	0	0	0	0		
29	0	0	0	0	0		
30	0	0	0	0	0		

Observer's Name (Print) **Robert J. Stewart**
 Observer's Signature **Robert J. Stewart** Date **4/18/12**
 Organization **FDEP**
 Certified By **E.T.A.** Date **2/15/12**

Additional Information
