

EPA VISIBLE EMISSION OBSERVATION FORM 1

Form Number Page 1 of 2

Continued on VEO Form Number

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

Company Name OUTHEASTERN S.C.E. CREMATORY

Facility Name # 0150046

Street Address 5500 WILLIAMS BURG DR

City PUNTA GORDA State FL Zip 33982

Process HUMAN CREMATION Unit # I Operating Mode 190 lbs

Control Equipment AFTERBURNER Operating Mode 1650

Describe Emission Point
SILVER STACK (NORTHERNMOST) ON MAIN BLDG.

Height of Emiss. Pt. Start 120' End 120' Height of Emiss. Pt. Rel. to Observer Start 120' End 120'

Distance to Emiss. Pt. Start 150 End 150 Direction to Emiss. Pt. (Degrees) Start 326 End 326

Vertical Angle to Obs. Pt. Start 16° End 16° Direction to Obs. Pt. (Degrees) Start 326 End 326

Distance and Direction to Observation Point from Emission Point
 Start N/A End N/A

Describe Emissions
 Start NONE End NONE Water Droplet Plume

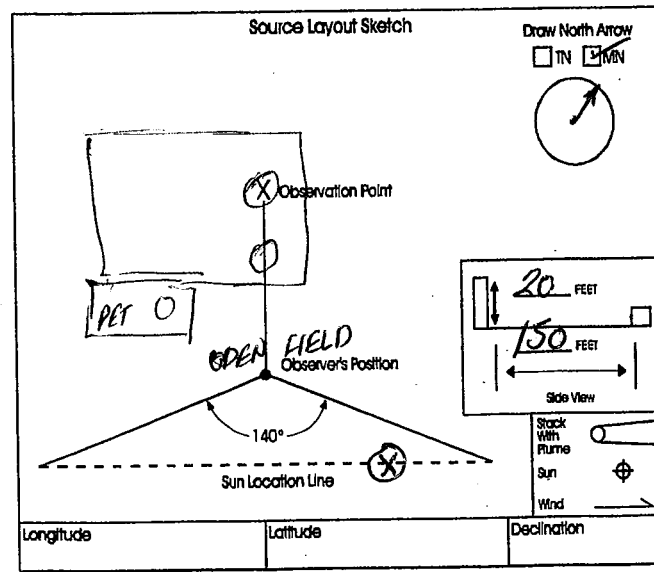
Emission Color Start N/A End N/A Attached Detached None

Describe Plume Background
 Start SKY End SKY Sky Conditions Start BROKEN End SAME

Background Color Start BLUE/WHITE End SAME Wind Speed Start 5-10 mph End SAME

Wind Direction Start E-SE End E-SE

Ambient Temp. Start 75°F End 76°F Wet Bulb Temp. RH Percent 78%



Additional Information
190 human remains cremated

Observation Date	Time Zone	Start Time	End Time	Comments	
4/29/13	EST	8:12AM	9:12AM		
Sec Min	0	15	30	45	Comments
1	0	0	0	0	
2	0	0	0	0	
3	0	0	0	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 4/29/13

Organization FDEP

Certified By E.T.A. Date 2/13/13

EPA VISIBLE EMISSION OBSERVATION FORM 1

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

Company Name Southeastern Crematory
 Facility Name # 0150046
 Street Address 5500 WILLIAMS BURG DR.
 City PUNTA GORDA State FL Zip _____

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

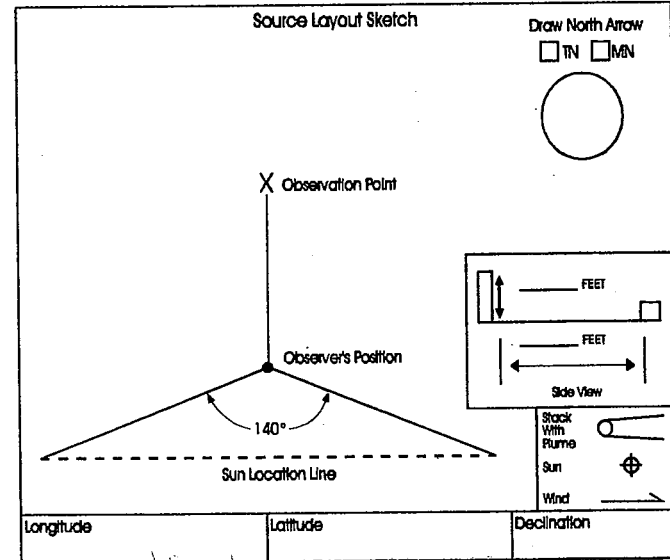
Describe Emission Point

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 _____ Start _____ End _____



Additional Information

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

Observation Date		Time Zone				Start Time	End Time
4/29/13		EST					9:12AM
Sec	0	15	30	45	Comments		
Min							
1	0	0	0	0			
2	0	0	0	0			
3	0	0	0	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 4/29/13
 Organization FDEP
 Certified By E.T.A. Date 2/13/13

EPA VISIBLE EMISSION OBSERVATION FORM 1

Form Number	Page <u>1</u> Of <u>2</u>
Continued on VEO Form Number	

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

Company Name S.E.F Southeastern Crem.
 Facility Name # D150046
 Street Address 5500 Williamsburg Dr.
 City PUNTA GORDA State FL Zip 33982

Process HUMAN CREMATION Unit # 2 Operating Mode 175lbs
 Control Equipment AFTER BURNER Operating Mode _____

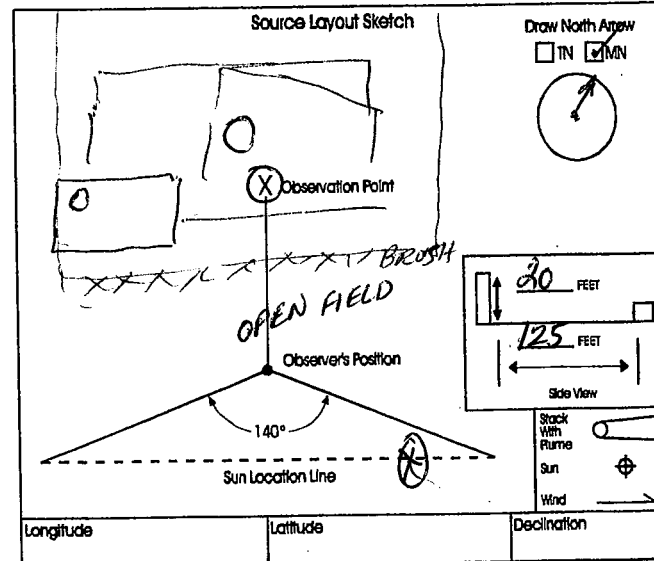
Describe Emission Point
STACK ON ROOF (SOUTHERN MOST)
ON MAIN CREMATORY BLDG.

Height of Emiss. Pt. Start ~20' End ~20' Height of Emiss. Pt. Rel. to Observer Start ~20' End ~20'
 Distance to Emiss. Pt. Start ~125' End ~125' Direction to Emiss. Pt. (Degrees) Start 326 End 326

Vertical Angle to Obs. Pt. Start ~6° End ~6° Direction to Obs. Pt. (Degrees) Start 326 End 326
 Distance and Direction to Observation Point from Emission Point Start N/A End N/A

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

Describe Plume Background
 Start SKY End SKY
 Background Color Start BLUE/WHITE End SAME Sky Conditions Start BROKEN End SAME
 Wind Speed Start 5-10MPH End SAME Wind Direction Start E-SE End E-SE
 Ambient Temp. Start 75° End 76°F Wet Bulb Temp. 78% RH Percent 78%



Additional Information
175 lbs human remains cremated

Sec Min	Time Zone				Comments
	0	15	30	45	
Observation Date <u>4/29/13</u> Start Time <u>8:12AM</u> End Time <u>9:12AM</u>					
1	60	0	0	0	<u>THROAT AIR NOT ON FOR FIRST 15 sec</u>
2	0	0	0	0	
3	0	0	0	0	<u>6 MIN AVG Opacity = 2.590</u>
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	

6° incline

new
175
old
190
PET
100lbs

Observer's Name (Print) Robert J. Stewart
 Observer's Signature Robert J. Stewart Date 4/29/13
 Organization FDEP
 Certified By E.T.A. Date 2/13/13

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 Southeastern CREMATORY
 Facility Name # 015 0046
 Street Address _____
 City _____ State _____ Zip _____

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

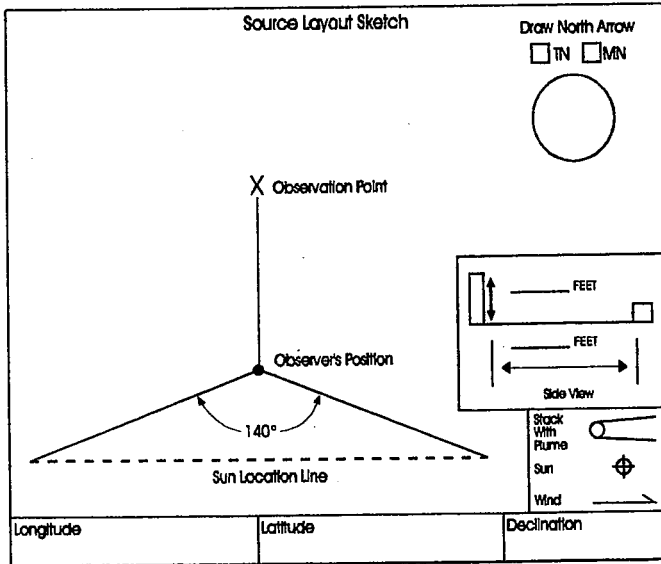
Describe Emission Point

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
4/29/13		EST					9:12 AM
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	0	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		
14	0	0	0	0	0		
15	0	0	0	0	0		
16	0	0	0	0	0		
17	0	0	0	0	0		
18	0	0	0	0	0		
19	0	0	0	0	0		
20	0	0	0	0	0		
21	0	0	0	0	0		
22	0	0	0	0	0		
23	0	0	0	0	0		
24	0	0	0	0	0		
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 4/29/13
 Organization FPPEP
 Certified By E.T.A. Date 2/13/13