

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: Cemex/ Binker Materials
 Facility Name: _____
 Street Address: 2040 Ortiz Ave
 City: Fort Myers State: FL Zip: 33905

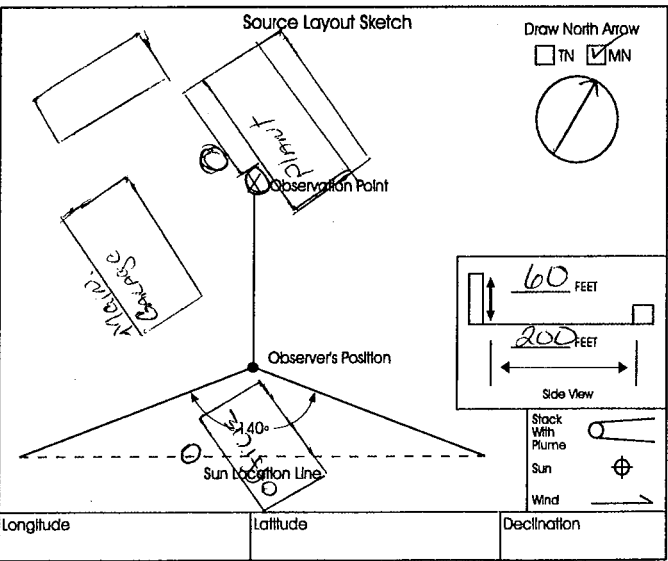
Process: Cement Tanker Unload Unit #: 1 Operating Mode: _____
 Control Equipment: Baghouse Operating Mode: _____

Describe Emission Point: Short & eastern silo with single baghouse
 Height of Emiss. Pt. Start: 60' End: 60' Height of Emiss. Pt. Rel. to Observer Start: 60' End: 60'
 Distance to Emiss. Pt. Start: 200' End: 200' Direction to Emiss. Pt. (Degrees) Start: 325° End: 325°

Vertical Angle to Obs. Pt. Start: 17° End: 17° Direction to Obs. Pt. (Degrees) Start: 325° End: 325°
 Distance and Direction to Observation Point from Emission Point Start: 0 End: 0

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

Describe Plume Background
 Start: Sky End: Sky
 Background Color: _____ Sky Conditions: _____
 Start: Blue/white End: Blue/white Start: Sant End: Sant
 Wind Speed: _____ Wind Direction: _____
 Start: 9mph End: 9mph Start: S End: S
 Ambient Temp.: _____ Wet Bulb Temp.: _____ RH Percent: _____
 Start: 81°F End: 84°F



Additional Information: _____

Min	Sec				Comments
	0	15	30	45	
1	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	
2	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	
3	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	
4	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	
5	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	
6	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	
7	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	
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9	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	
10	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	
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18	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	
19	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	
20	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	
21	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	
22	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	
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26	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	
27	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	
28	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	
29	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	
30	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	

Observer's Name (Print): Sherrill Culliver
 Observer's Signature: Sherrill Culliver Date: 1/24/12
 Organization: FDEP
 Certified By: ETA Date: 8/11

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
Cemex/Binker Materials

Facility Name

Street Address

City State Zip

Process
Cement Tanker Unit 1

Unit # Operating Mode

Control Equipment Operating Mode

Describe Emission Point

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

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

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

Source Layout Sketch

Draw North Arrow
 TN MN

X Observation Point

Observer's Position

Sun Location Line

140°

FEET

FEET

Side View

Stack With Plume Sun

Wind →

Longitude Latitude Declination

Additional Information

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

Observer's Name (Print)

Observer's Signature Date

Organization

Certified By Date

EPA VISIBLE EMISSION OBSERVATION FORM 1

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

Company Name
Cemex / Binker Materials

Facility Name

Street Address
2040 Ortiz Ave

City
Fort Myers State
FL Zip
33905

Process
Flyash Tanker Unload Unit #
2 Operating Mode

Control Equipment
Baghouse Operating Mode
10psi

Describe Emission Point
Tall & western silo with single baghouse

Height of Emiss. Pt.
Start *70'* End *70'* Height of Emiss. Pt. Rel. to Observer
Start *70* End *70*

Distance to Emiss. Pt.
Start *250'* End *250'* Direction to Emiss. Pt. (Degrees)
Start *317°* End *317°*

Vertical Angle to Obs. Pt.
Start *16°* End *16°* Direction to Obs. Pt. (Degrees)
Start *317°* End *317°*

Distance and Direction to Observation Point from Emission Point
Start *0* End *0*

Describe Emissions
Start *None* End *Lofting Plume*

Emission Color
Start *N/A* End *Brown* Water Droplet Plume

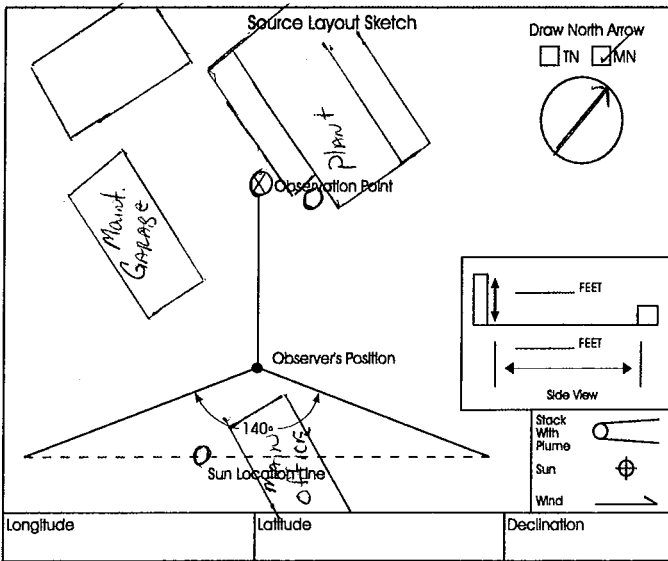
Attached Detached None

Describe Plume Background
Start *Sky* End *Sky*

Background Color
Start *Blue/White* End *Blue/White* Sky Conditions
Start *Scat* End *Scat*

Wind Speed
Start *9mph* End *9mph* Wind Direction
Start *S* End *S*

Ambient Temp.
Start *81°* End *84°* Wet Bulb Temp. RH Percent



Additional Information
Silo has no full silo indicator light or warning.

Form Number Page *1* of *2*

Continued on VEO Form Number

Min	Sec				Comments
	0	15	30	45	
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	
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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)
Sherrill Culver

Observer's Signature
Sherrill Culver Date
11/24/12

Organization
FDEP

Certified by
ETA Date
8/11

EPA VISIBLE EMISSION OBSERVATION FORM 1

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

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

Company Name
Cemex / Bunker Materials

Facility Name _____

Street Address _____

City _____ State _____ Zip _____

Process
Flash Tanker Unload Unit # *2* 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 Attached Detached None

Describe Plume Background

Start _____ End _____ Background Color _____

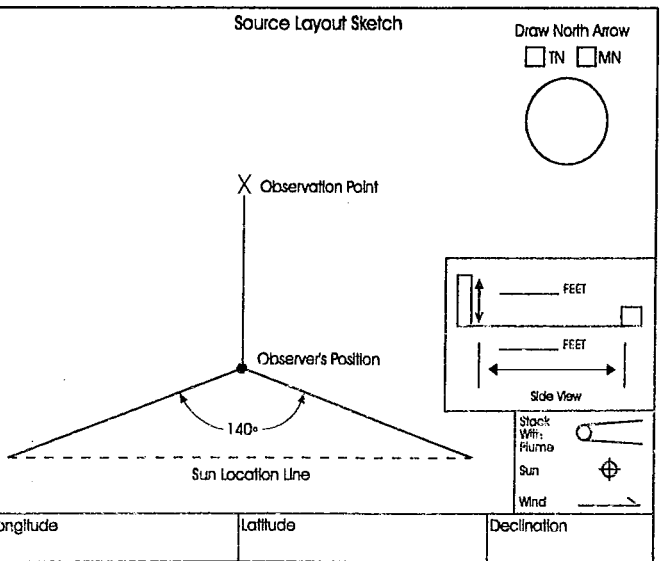
Start _____ End _____ Sky Conditions _____

Start _____ End _____ Wind Speed _____

Start _____ End _____ Wind Direction _____

Start _____ End _____ Ambient Temp. _____

Start _____ End _____ Wet Bulb Temp. _____ RH Percent _____



Additional Information

Min	Time Zone				Start Time	End Time	Comments
	Sec	0	15	30			
1	0	15	30	45			
2	0	15	30	45			
3	0	15	30	45			
4	0	15	30	45			
5	0	15	30	45			
6	0	15	30	45			
7	0	15	30	45			
8	0	15	30	45			
9	0	15	30	45			
10	0	15	30	45			
11	0	15	30	45			
12	0	15	30	45			
13	0	15	30	45			
14	0	15	30	45			<i>laminar Avg - 3%</i>
15	10	10	15	10			
16	5	0	0				
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							
28							
29							
30							

Observer's Name (Print) _____

Observer's Signature _____ Date _____

Organization _____

Certified By _____ Date _____