

HUMAN CREMATORY



COMPLIANCE INSPECTION CHECKLIST

INSPECTION TYPE: ANNUAL (INS1, INS2) RE-INSPECTION (FUI)	COMPLAINT/DISCOVERY ARMS COMPLAINT NO:	(CI)				
AIRS ID#: 1010360 DATE: 8-31-11	ARRIVE: <u>12:00PM</u>	DEPART: 1:00PM				
FACILITY NAME: MORGAN FUNERAL HOME &	& CREMATION SERVICES					
FACILITY LOCATION: 6025 TROUBLE CREEK RD						
NEW PORT RICHEY	Y 34653-5299					
OWNER/AUTHORIZED REPRESENTATIVE: T. Email: CHRISLFD@AOL.COM CONTACT NAME: THEODORE KADUK Email: CHRISLFD@AOL.COM ENTITLEMENT PERIOD: 3/10/2009 / 8/22/20 (effective date) (end date)	Mobile: PHONE: Mobile:	(727)847-3999 (727)809-1694 (727)847-3999 (727)809-1694				
Facility Section						
PART I: INSPECTION COMPLIANCE STATUS	(check only one box)					
☑ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPLIANCE						
PART II: ONSITE INTRODUCTORY MEETING	(check 🖾 cm)					
1. Name(s) of facility representative(s): Mr. Theodore	: Christopher Kaduk	box for each question)				
Brief Notes: New Owner/Operator						
2. Is the Authorized Representative still THEODORE If no, who is?:	KADUK?	YesNo				
If different, did the facility provide an administrative 3. Is the facility contact still THEODORE KADUK? If no, who is?:	e update within 30 days?	Yes				

⊠..No □..No

- Yes

Emissions Unit Section 1 – Human Crematory-primary/2ndary chmbrs, NG fired, 150 #'s/hr

PART I: FILE REVIEW PRIOR TO INSPECTION	(check 🗹 box for each	only one question)
a. Complete AC application or, if no AC permit, initial GP registration received on or after August 30, 1989? b. If yes, were design calculations provided then to confirm a sufficient volume in the	⊠ Yes	□No
secondary chamber combustion zone to provide for at least a 1.0 second gas residence time at 1800 degrees Fahrenheit? ————————————————————————————————————	⊠ Yes □ Yes	□No ⊠No
4. Past Visible Emissions (VE) tests: 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		□No □No
operation? 🔯 N/A d. Date of last VE test: 06/06/2011	☐ 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)?		□No □No
PART II: <u>VISIBLE EMISSIONS TESTING</u>	(check 🗹 box for each	only one question)
Was a visible emissions test conducted by the facility for this unit during this site visit? a. Was the test conducted with the unit operating at a capacity of one adult-sized cadaver? b. Was the visible emissions test conducted according to EPA Method 9?	- 🔲 Yes	⊠No □No □No
c. The visible emission test resulted in an opacity of % for the highest six minute average. d. Did the visible emission test demonstrate compliance with the limit?		□No
2. Was a visible emissions test conducted by the inspector during this site visit?	- Yes Yes	⊠No □No
d. Did the visible emission test demonstrate compliance with the limit? ————————————————————————————————————		□No
If yes, what reason?	☐ Yes	⊠No
PART III: MONITORING/RECORDKEEPING REQUIREMENTS	(check 🗹 box for each	•
1. Were there any objectionable odors detected?	- Yes	⊠No
An upwind/downwind survey of the facility was conducted. The observed parameters were: Downwind odor level detected- Wind direction - Upwind odor level detected-	(1-10)	
2. Continuous Monitoring Systems — a Is a continuous temperature monitoring system installed on each unit to record temperatures in the		
secondary chamber in accordance with the manufacturer's instructions?	- X Yes	□No
b Is the temperature probe properly placed, at least at the distance where the 1.0 second gas residence time at \(\sum 1,800^1 \) \(\sum 1,600^2 \) degrees was determined? ————————————————————————————————————	- X Yes	□No

II CART TIL INITIALITY RITERAL AND REPRESENTATION REPORTS (COMPRESED)		
PART III: MONITORING/RECORDKEEPING REQUIREMENTS (continued)		l
c. Are the following records kept on file, available for inspection, for at least the past two years? 1) All temperature measurements	∑ Yes	□No
 all continuous monitoring systems, monitoring devices, and performance testing measurements; monitoring system all continuous performance evaluations ————————————————————————————————————	Yes	No □No
Adjustments Preventive maintenance performed on systems/devices Corrective maintenance performed on systems/devices	✓ Yes✓ Yes✓ Yes	□No □No □No
 d. Are the temperature charts properly documented with operator name, operator indication of when cremation in the primary chamber was begun, date, time, and temperature markings e. Was the crematory unit installed after 2/1/07? If no, skip e.(1) -(3)	Yes Yes	□No ⊠No
 (1) Is the crematory unit equipped and operated with a pollutant monitoring system to automatical control combustion based on continuous in-stack opacity measurement? (2) Is the system calibrated to restrict combustion in the primary chamber whenever any opacity 	☐ Yes	□No
exceeds 15% opacity? (3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?	☐ Yes	□No □No
WOODSHILL HIS MINIMANUM IS ASSOCIATION OF THE PROPERTY OF THE	<u> </u>	<u></u>
PART IV: SECONDARY COMBUSTION ZONE TEMPERATURES	(check box for each	only one ch question)
Total Visit of American American		
If the application to construct was <u>BEFORE</u> August 30, 1989 is the: a. actual operating temperature of the secondary chamber combustion zone no less than 1400°F throughout the combustion process in the primary chamber? ————————————————————————————————————		□No
 a. actual operating temperature of the secondary chamber combustion zone no less than 1400°F throughout the combustion process in the primary chamber? ————————————————————————————————————	ion Yes	_
 a. actual operating temperature of the secondary chamber combustion zone no less than 1400°F throughout the combustion process in the primary chamber?	ion Yes	□No
 a. actual operating temperature of the secondary chamber combustion zone no less than 1400°F throughout the combustion process in the primary chamber? ————————————————————————————————————	ion Yes Yes Yes	□No
 a. actual operating temperature of the secondary chamber combustion zone no less than 1400°F throughout the combustion process in the primary chamber? ————————————————————————————————————	ion Yes Yes ion Yes (check	□No
 a. actual operating temperature of the secondary chamber combustion zone no less than 1400°F throughout the combustion process in the primary chamber? ————————————————————————————————————	ion Yes Yes ion Yes (check box for eac	□No □No □No

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PART VI: EQUIPMENT MAINTENANCE		(check ☑ box for each	only one question)
1. Is the crematory unit maintained in accordance with the manufact	urer's specifications?	- X Yes	□No
2. Is there a written plan onsite which addresses the operating process shutdown and malfunction?	lures during startup,	· 🛛 Yes	□No
3. Does the crematory allow for a visible check on the flame charact	eristics?	- 🗌 Yes	⊠No
If no, skip a. – b. a. Was the flame characteristic visually checked at least once dur. b. Was the flame adjusted when necessary?			□No □No
PART VII: EU INSPECTION COMPLIANCE STATUS (check	only one box)		
☑ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE	SIGNIFICANT Non-COMPI	LIANCE	
Facility Section	(continued)		
	(
SPECIAL CONDITIONS AND PROCEDURES			only one
		box for each	n question) i
Administrative Changes: 1. Were there any changes in the name, address, or phone number of	the facility or authorized representa	tive not	
associated with a change in ownership or with a physical relocation	n of the facility or any emissions un	its or	_
operations comprising the facility; or any other similar minor adm 2. If yes, did the facility provide written notification within 30 days			⊠No □No
New or Modified Process Equipment or Change in Ownership:	<u> </u>	_	
3. Since the last registration form submittal has there been		- Yes	□No
a. Installation of any new process equipment? b. Alterations to existing process equipment without replace	ement?		⊠No ⊠No
c. Replacement of existing equipment with equipment that i			⊠No
d. A change in ownership?		- 🛛 Yes	□No
If the any answer to 3a. – d. is Yes, was a new registration submitted 30 days prior to the change?	torm and the appropriate fee	√ ⊠ Yes	□No
Sasante de Cays provi de la Camago			
Chris Haines & Joe Panetta	08/31/	2011	
Inspector's Name (Please Print)	Date of Inspection		
	08/31/2014		
TIM HOOD XXIM IMV	06/31/2014		

COMMENTS: Joe Panetta and I (Chris Haines) arrived at the facility at approximately 12:00PM. We met with Mr. Theodore Kaduk, who introduced himself as Christopher. Mr. Kaduk showed us the cremation unit and explained his process to us. Being a new owner I made sure that all the basic maintenance and forms were being completed and that the temperature records were filled out correctly. I then asked to see if he had a proper startup/shutdown/malfunction plan and that he had the correct MSDS Sheets on hand for plastic bags. Everything appeared to be in order even across the transition from the previous to current owner. I gave Mr. Kaduk my card and told him that if he had any questions or comments to give me a call. We concluded our inspection and left at approximately 1:00PM.