HUMAN CREMATORY

COMPLIANCE INSPECTION CHECKLIST

Environmental Compliance

INSPECTION TYPE: ANNUAL (INS1, INS2) ☒ COMPLAINT/DISCOVERY (CI) ☐

RE-INSPECTION (FUI) ☐ ARMS COMPLAINT NO:

AIRS ID#: 0830004 **DATE:** 10/27/2011 **ARRIVE:** 13:00 **DEPART:** 13:45

FACILITY NAME: ROBERTS FUNERAL HOMES

FACILITY LOCATION: 606 SW 2ND AVE

OCALA 34471-0915

OWNER/AUTHORIZED REPRESENTATIVE: BRUCE SESSLER **PHONE:** (352)622-4141
Email: bsessler@stei.com **Mobile:**
CONTACT NAME: Tory Gee **PHONE:** (352)622-4141
Email: tgee@stei.com **Mobile:**
ENTITLEMENT PERIOD: 12/14/2008 (effective date) / 12/14/2013 (end date)

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 ☑ only one box for each question)

1. Name(s) of facility representative(s): Tory Gee

   Brief Notes: Mr. Gee is the manager over the cremation units.

2. Is the Authorized Representative still BRUCE SESSLER? ---------- ☒ Yes ☐ No
   If no, who is?: _____
   If different, did the facility provide an administrative update within 30 days? ---------- ☐ Yes ☐ No
3. Is the facility contact still ? ---------- ☐ Yes ☒ No
   If no, who is?: Tory Gee
4. Will facility be conducting VE test(s) during today's inspection? ---------- ☐ Yes ☒ No
   If yes, was the compliance authority notified at least 15 days in advance? ---------- ☐ Yes ☐ No

Emissions Unit Section

2 – Human Crematory-w/afterburner, opacity monitor, NG fired

PART I: FILE REVIEW PRIOR TO INSPECTION (check ☑ only one box for each question)

1. a. Complete AC application or, if no AC permit, initial GP registration received on or after August 30, 1989? ☒ Yes ☐ No
   b. If yes, were design calculations provided then to confirm a sufficient volume in the secondary chamber combustion zone to provide for at least a 1.0 second gas residence time at 1800 degrees Fahrenheit? ☒ Yes ☐ No
2. Crematory unit installed after February 1, 2007? ☐ Yes ☐ No
3. Date of last inspection: 9/18/2009
4. Past Visible Emissions (VE) tests:
   a. Was a VE test performed within each of the past 4 calendar years? ☒ Yes ☐ No
   b. Has a VE test been performed yet within the current calendar year? ☐ Yes ☒ No
   c. If first year of operation, was a VE test performed within 30 days of commencing operation? ☒ N/A ☐ Yes ☐ No
   d. Date of last VE test:
   e. Was the VE test report filed with the compliance authority no later than 45 days after the test? ☒ Yes ☐ No
   f. Did the facility demonstrate compliance during the last VE test? ☒ Yes ☐ No
   If no, what was the problem (if known)?

PART II: VISIBLE EMISSIONS TESTING (check ☑ only one box for each question)

1. **Was a visible emissions test conducted by the facility for this unit during this site visit?** ☐ Yes ☒ No
   a. Was the test conducted with the unit operating at a capacity of one adult-sized cadaver? ☐ Yes ☐ No
   b. Was the visible emissions test conducted according to EPA Method 9? ☐ Yes ☐ 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? ☐ Yes ☐ No

☐ (5% opacity, six-minute average, except that visible emissions not exceeding 15% opacity shall be allowed for up to six minutes in any one-hour)

2. **Was a visible emissions test conducted by the inspector during this site visit?** ☐ Yes ☒ No
   a. Was the test conducted with the unit operating at a capacity of one (1) adult-sized cadaver? ☐ Yes ☐ No
   b. Was the visible emissions test conducted according to EPA Method 9? ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ☐ Yes ☐ 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? ☐ Yes ☐ No
3. **Is there any reason to ask for a special test to determine compliance with the PM and CO standards?** ☐ Yes ☒ No

   If yes, what reason?

PART III: MONITORING/RECORDKEEPING REQUIREMENTS (check ☑ only one box for each question)

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? ☒ Yes ☐ No

b Is the temperature probe properly placed, at least at the distance where the 1.0 second gas residence time at ☒ 1,800[1] ☐ 1,600[2] degrees was determined? ☒ Yes ☐ No

(Application or initial notification: [1] received on or after 8/30/89; [2] received before 8/30/89)

PART III: MONITORING/RECORDKEEPING REQUIREMENTS (continued)

c. Are the following records kept on file, available for inspection, for at least the past two years?

1) All temperature measurements	☒ Yes	☐ No
2) all continuous monitoring systems, monitoring devices, and performance testing measurements; monitoring system all continuous performance evaluations	☒ Yes	☐ No
3) All CEMS or monitoring device calibration checks (last performed on ( )	☒ Yes	☐ No
4) Adjustments	☒ Yes	☐ No
5) Preventive maintenance performed on systems/devices	☒ Yes	☐ No
6) Corrective maintenance performed on systems/devices	☒ Yes	☐ 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	☒ Yes	☐ No
e. Was the crematory unit installed after **2/1/07**? If no, skip e.(1) – (3)	☒ Yes	☐ No
(1) Is the crematory unit equipped and operated with a pollutant monitoring system to automatically control combustion based on continuous in-stack opacity measurement?	☒ Yes	☐ No
(2) Is the system calibrated to restrict combustion in the primary chamber whenever any opacity exceeds 15% opacity ?	☒ Yes	☐ No
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?	☒ Yes	☐ No

PART IV: SECONDARY COMBUSTION ZONE TEMPERATURES (check ☑ only one box for each question)

1. If the application to construct was **BEFORE** 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?	☐ Yes	☐ No
b. secondary chamber combustion zone temperature equal to or greater than **1400°F** before the cremation process begins in the primary chamber?	☐ Yes	☐ No
2. If the application to construct **ON** or **AFTER** August 30, 1989 is the:		
a. the actual operating temperature of the secondary chamber combustion zone no less than **1600°F** throughout the combustion process in the primary chamber?	☒ Yes	☐ No
b. secondary chamber combustion zone temperature equal to or greater than **1600°F** before the cremation process begins in the primary chamber?	☒ Yes	☐ No

PART V: ALLOWED MATERIALS (check ☑ only one box for each question)

1. *Other than* human or fetal remains with appropriate containers or clothing, are any materials, including biomedical wastes, incinerated in the unit?	☐ Yes	☒ No
2. Do cremation containers contain no more than 0.5 % (percent) by weight chlorinated plastics as certified by the manufacturer?	☒ Yes	☐ No
If yes, is the certifying documentation from the manufacturer kept on file for at least 2 years from use?	☒ Yes	☐ No

PART VI: EQUIPMENT MAINTENANCE

(check ☑ only one box for each question)

1. Is the crematory unit maintained in accordance with the manufacturer's specifications? ----------	☒ Yes	☐ No
2. Is there a written plan onsite which addresses the operating procedures during startup, shutdown and malfunction? ----------	☒ Yes	☐ No
3. Does the crematory allow for a visible check on the flame characteristics? ---------- If no, skip a. – b.	☒ Yes	☐ No
a. Was the flame characteristic visually checked at least once during each operating shift? ----------	☒ Yes	☐ No
b. Was the flame adjusted when necessary? ----------	☒ Yes	☐ No

PART VII: EU INSPECTION COMPLIANCE STATUS (check ☑ only one box)

☒ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPLIANCE

Emissions Unit Section

3 – Human Crematory-w/afterburner,electr.ctrl switch, NG fired

PART I: FILE REVIEW PRIOR TO INSPECTION (check ☑ only one box for each question)

1. a. Complete AC application or, if no AC permit, initial GP registration received on or after August 30, 1989? ---------- ☐ Yes ☒ No
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3. Date of last inspection: 9/18/2011
4. Past Visible Emissions (VE) tests:
   a. Was a VE test performed within each of the past 4 calendar years? ---------- ☒ Yes ☐ No
   b. Has a VE test been performed yet within the current calendar year? ---------- ☒ Yes ☐ No
   c. If first year of operation, was a VE test performed within 30 days of commencing operation? ---------- ☒ N/A ☐ Yes ☐ No
   d. Date of last VE test:
   e. Was the VE test report filed with the compliance authority no later than 45 days after the test? ------ ☒ Yes ☐ No
   f. Did the facility demonstrate compliance during the last VE test? ---------- ☒ Yes ☐ No
   If no, what was the problem (if known)?

PART II: VISIBLE EMISSIONS TESTING (check ☑ only one box for each question)

1. **Was a visible emissions test conducted by the facility for this unit during this site visit?** ---------- ☐ Yes ☒ No
   a. Was the test conducted with the unit operating at a capacity of one adult-sized cadaver? ---------- ☐ Yes ☐ No
   b. Was the visible emissions test conducted according to EPA Method 9? ---------- ☐ Yes ☐ 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? ---------- ☐ Yes ☐ No

☐ (5% opacity, six-minute average, except that visible emissions not exceeding 15% opacity shall be allowed for up to six minutes in any one-hour)

2. **Was a visible emissions test conducted by the inspector during this site visit?** ---------- ☐ Yes ☒ No
   a. Was the test conducted with the unit operating at a capacity of one (1) adult-sized cadaver? ---------- ☐ Yes ☐ No
   b. Was the visible emissions test conducted according to EPA Method 9?□□□□□□□□□□□□□□□□□□□□ ---------- -------- ☐ Yes ☐ No
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3. **Is there any reason to ask for a special test to determine compliance with the PM and CO standards?** ☐ Yes ☒ No

   If yes, what reason?

PART III: MONITORING/RECORDKEEPING REQUIREMENTS (check ☑ only one box for each question)

1. **Were there any objectionable odors detected?** ---------- ☐ Yes ☒ No
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(Application or initial notification: [1] received on or after 8/30/89; [2] received before 8/30/89)

PART III: MONITORING/RECORDKEEPING REQUIREMENTS (continued)

c. Are the following records kept on file, available for inspection, for at least the past two years?

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3) All CEMS or monitoring device calibration checks (last performed on ( ) ---------- ☒ Yes ☐ No
4) Adjustments ---------- ☒ Yes ☐ No
5) Preventive maintenance performed on systems/devices ---------- ☒ Yes ☐ No
6) Corrective maintenance performed on systems/devices ---------- ☒ Yes ☐ 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 ---------- ☒ Yes ☐ No

e. Was the crematory unit installed after **2/1/07**? If no, skip e.(1) – (3) ---------- ☐ Yes ☒ No

(1) Is the crematory unit equipped and operated with a pollutant monitoring system to automatically control combustion based on continuous in-stack opacity measurement? ---------- ☐ Yes ☐ No

(2) Is the system calibrated to restrict combustion in the primary chamber whenever any opacity exceeds 15% opacity ? ---------- ☐ Yes ☐ No

(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule? ---------- ☐ Yes ☐ No

PART IV: SECONDARY COMBUSTION ZONE TEMPERATURES

(check ☑ only one box for each question)

1. If the application to construct was **BEFORE** 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? ---------- ☒ Yes ☐ No
   b. secondary chamber combustion zone temperature equal to or greater than **1400°F** before the cremation process begins in the primary chamber? ---------- ☒ Yes ☐ No
2. If the application to construct **ON** or **AFTER** August 30, 1989 is the:
   a. the actual operating temperature of the secondary chamber combustion zone no less than **1600°F** throughout the combustion process in the primary chamber? ---------- ☐ Yes ☐ No
   b. secondary chamber combustion zone temperature equal to or greater than **1600°F** before the cremation process begins in the primary chamber? ---------- ☐ Yes ☐ No

PART V: ALLOWED MATERIALS

(check ☑ only one box for each question)

1. *Other than* human or fetal remains with appropriate containers or clothing, are any materials, including biomedical wastes, incinerated in the unit? ---------- ☐ Yes ☒ No

2. Do cremation containers contain no more than 0.5 % (percent) by weight chlorinated plastics as certified by the manufacturer? ---------- ☒ Yes ☐ No
   If yes, is the certifying documentation from the manufacturer kept on file for at least 2 years from use? ☒ Yes ☐ No

PART VI: EQUIPMENT MAINTENANCE

(check ☑ only one box for each question)

1. Is the crematory unit maintained in accordance with the manufacturer's specifications? ----------	☒ Yes	☐ No
2. Is there a written plan onsite which addresses the operating procedures during startup, shutdown and malfunction? ----------	☒ Yes	☐ No
3. Does the crematory allow for a visible check on the flame characteristics? ---------- If no, skip a. – b.	☐ Yes	☒ No
a. Was the flame characteristic visually checked at least once during each operating shift? ----------	☐ Yes	☐ No
b. Was the flame adjusted when necessary? ----------	☐ Yes	☐ No

PART VII: EU INSPECTION COMPLIANCE STATUS (check ☑ only one box)

☒ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPLIANCE

Facility Section (continued)

SPECIAL CONDITIONS AND PROCEDURES

(check ☑ only one box for each question)

Administrative Changes:		
1. Were there any changes in the name, address, or phone number of the facility or authorized representative not associated with a change in ownership or with a physical relocation of the facility or any emissions units or operations comprising the facility; or any other similar minor administrative change at the facility? ----	☐ Yes	☐ No
2. If yes, did the facility provide written notification within 30 days of the change? ----------	☐ Yes	☐ No
New or Modified Process Equipment or Change in Ownership:		
3. Since the last registration form submittal has there been ----------	☐ Yes	☐ No
a. Installation of any new process equipment? ----------	☐ Yes	☐ No
b. Alterations to existing process equipment without replacement? ----------	☐ Yes	☐ No
c. Replacement of existing equipment with equipment that is substantially different? ----------	☐ Yes	☐ No
d. A change in ownership? ----------	☐ Yes	☐ No
If the any answer to 3a. – d. is Yes , was a new registration form and the appropriate fee submitted 30 days prior to the change? ----------	☐ Yes	☐ No

Michael Young — Inspector's Name (Please Print)

10/27/11 — Date of Inspection

Michael Young — Inspector's Signature

Digitally signed by Michael Young
DN: cn=Michael Young, o=Florida Department of Environmental Protection, ou=Air Complaince Section, email=Michael.Young@dep.state.fl.us, c=US
Date: 2011.11.03 13:00:15 -04'00'

12/05/2013 — Approximate Date of Next Inspection

COMMENTS: At the time of the inspection the units were not in operation. Attached are the comments to an inquiry on a complaint regarding smoke coming from the facility on September 27, 2011. They facility followed their operations plan and were able to bring the unit back into acceptable limits, once the problem was noticed. The facility is found to be incompliance.

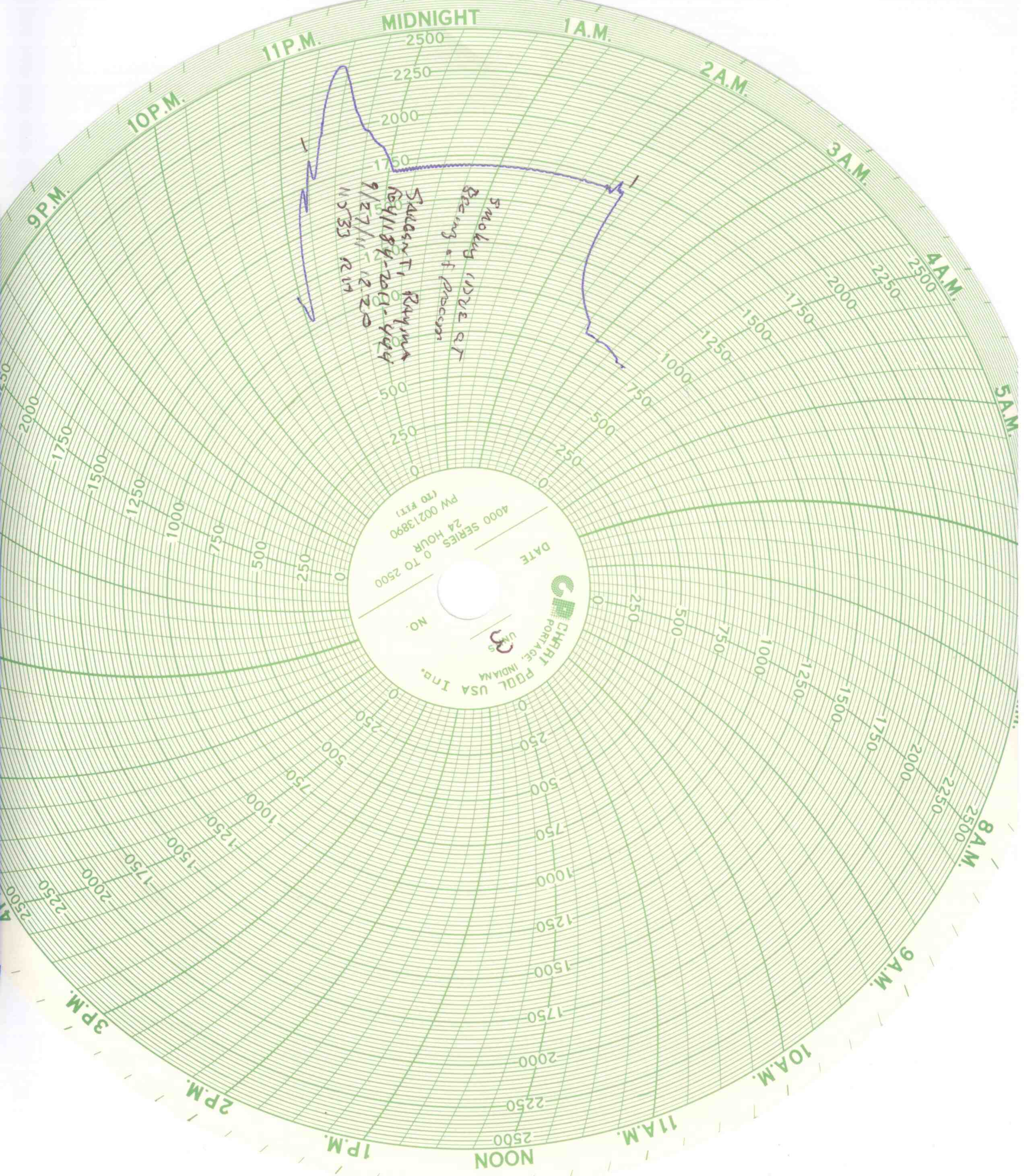
Young, Michael

From: Gee, Tory [tgee@stei.com]
Sent: Wednesday, November 02, 2011 9:54 AM
To: Young, Michael
Subject: Crematory Smoking Incident / Roberts Funeral Home
Attachments: Crem. Log info Roberts.pdf; Smoking Case operator Statement.docx

Michael,

Included in the attachments are the statement of the operator, wheel chart, and log book references for the cremation which caused the complaint regarding the thick black smoke at Roberts Funeral Home in Ocala. I did notice on item that I believe is in error. During our meeting you had referenced the 28th as the date of the complaint. However all of our records indicate the case that produced the smoke was on the 27th, not the 28th of Sept. Our operator makes notes anytime there is an incident such as this on the charts and logs.
Please let me know if I can be of further assistance.

Tory L. Gee
Director Of Funeral Home &
cemetery Operations
Jacksonville, Marion, Hernando markets
Off: 352-622-4141
Fax: 352-622-1652


MIDNIGHT
1 A.M.
2 A.M.
3 A.M.
4 A.M.
5 A.M.
8 A.M.
9 A.M.
10 A.M.
11 A.M.
NOON
1 P.M.
2 P.M.
3 P.M.
9 P.M.
10 P.M.
11 P.M.
0
250
500
750
1000
1250
1500
1750
2000
2250
2500
CP CHART
PORTAGE, INDIANA
POOL USA Inc.
DATE
NO.
UNITS
4000 SERIES 0 TO 2500
24 HOUR
PW 00213890
(TO PTI)
9/27/11 12:20

DAILY LOG

Machine #

Type of Retort

Crematory Name/Location

SEPTEMBER 2011

Date/Time	Case # & Type	Visible Emissions	Temp	Comments	Initials
9/27 12:20	F041184 2011 444	yes / no	1710	CB HEAVY BLACK SMOKE AT BEGINNING #3 OF PROCESS. REPORTED TO BRUCE AS TEMP CAME DOWN LIGHT GRY SMOKE	RH
9/28 1:35	F041184 2011 443	yes / no	1710	CB #3	RH
9/28 2:00	2011 40878 172	yes / no	1750	CB #1	RH
9/29 8:25	F041251 2011 549.	yes / no	1710	CB #3	RH
9/29 8:50	F041244 2011 314	yes / no	1715	CB #1	RH
9/29 11:40	F041251 2011 544	yes / no	1710	CB #3	RH
		yes / no			
		yes / no			
		yes / no			
		yes / no			
		yes / no			
		yes / no			
		yes / no			

To be completed by Crematory Operator.

September 011

To Crematory By	To Crematory Date	Permit No.	Deceased Name	Tag No.	DOD	DOC	County	FD	Chapel	Crem. By	MA No.	Crem. Cont.	Body Lbs.	Time Start	Time Finish	Processing (initials) Operator	Out	Pack	Urn	Mail	Gave To	Personal Effects / Jewelry	
		2011 40878 163	Venditti, Rosemary	11526	9/11	9/25	Clay	CF	AP	LE	01	CB	150	845	1145	JE	JE	JE	CB	X			73
		F041251 2011 546	Dylewski, Bernadette	11525	9/20	9/25	Marion	BS	R	LE	03	CB	170	830	1120	JE	JE	JE	CB	X			74
		F041248 2011 469	Metzger, Hildegard	11527	9/16	9/25	Marion	BS	W	LE	03	CB	160	1145	140	JE	JE	JE	CB	X			75
	CREMATORY ON PREMISES	F041184 2011 440	Couture, Melva.	11528	9/20	9/25	Marion	BR	AF	LE	01	CB	130	1215	215	JE	JE	JE	CB	X			76
		F041184 2011 439	Moss, Lillian.	11529	9/17	9/25	Marion	SE	AF	LE	03	CB	140	225	425	JE	JE	JE	CB	X			77
		F041251 2011 545	Benoit, Corinne	11530	9/17	9/25	Marion	DB	R	LE	01	CB	130	255	455	JE	JE	JE	CB	X	TO CABINET FOR CREMATED REMAINS		78
		F041244 2011 323	KNOPF, ALICE R.	11531	9/21	9/27	Marion	MC	E	RH	3	CB	150	8:45	11:50	RH	RH	RH	CB	N			79
	CREMATORY ON PREMISES	F041184 2011 442	FLINT, RICHARD H	11532	9/22	9/27	Sumter	SE	AF	RH	1	CB	250	9:05	12:10	RH	RH	RH	CB	N			80
★	→	F041184 2011 444	SARGENT, RAYMA F.	11533	9/24	9/27	Marion	SE	AF	RH	3	CB	170	12:20	3:15	RH	RH	RH	CB	N			81
		F041184 2011 443	WICKERSON, KIM S.	11534	9/23	9/28	Lake	BR	AF	RH	3	CB	175	1:35	4:10	RH	RH	RH	CB	N			82
		2011 40878 172	HALL, THOMAS F.	11535	9/20	9/28	Duval	mk	AFH	RH	1	CB	175	2:00	4:25	RH	RH	RH	CB	N			83
	CREMATORY ON PREMISES	F041251 2011 549	KIMBALL, SCOTT	11536	9/21	9/29	Marion	RF	R	RH	3	CB	225	8:25	10:50	RH	RH	RH	STATION	Y			84
		F041244 2011 314	HENDRICKSON, STEPHEN	11537	9/3	9/29	Marion	MC	E	RH	1	CB	200	8:50	11:30	RH	RH	RH	FAMILY OPEN	N			85
	CREMATORY ON PREMISES	F041251 2011 544	BIERNANT, ROZANNA	11538	9/17	9/29	Marion	DB	R	RH	3	CB	175	11:40	1:25	RH	RH	RH	PLASTIC	Y	TO CABINET FOR CREMATED REMAINS		86
																							87
																							88
																							89
																							90

Case: FO41184-2011-444

September 27, 2011

12:20

At the beginning of the second round of cremation and after giving the unit a thirty (30) minute cooling off period and checking the chamber I preceded with this case. The person was approximately 170 lbs and the only content besides the defendant in the cremation container was a heavy bath robe that the family had requested to be left on.

The machine had reached temperature of 1750 and after placing the metal identification disk into the chamber I rolled the body in and closed the chamber door. After charting at the beginning of the process the contents in the chamber "ran away" and the temperature went beyond 2000 degrees. Heavy black smoke began to billow from the smoke stack. Due to procedure and protocol I attempted to report this incident to Russell Ford who is the FDIC for the Crematory. Due to his unavailability because of a funeral service I contacted Bruce Sessler the FDIC for the establishment and reported what was going on. We stayed in contact throughout the incident via cell phone.

I continued to monitor these events both inside and out as the smoke went from heavy black to light grey. As the temperature began to come down and the smoke dissipated, only the afterburner remained on.

The machine chart will show that throughout the process the machine remained on and went into automatic mode throughout the whole incident.

John Hughli III