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-	North Party
	FLORIDA
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HUMAN CREMATORY



COMPLIANCE INSPECTION CHECKLIST

	INUAL (INS1, INS2)	COMPLAINT/DISCOVERY ARMS COMPLAINT NO:	(CI)					
AIRS ID#: 1270169 DATE: FACILITY NAME: ALL FL		ARRIVE: <u>14:00</u>	DEPART: <u>14:40</u>					
FACILITY LOCATION:	145 S HWY 17-92 DEBARY 32713							
RESPONSIBLE OFFICIAL	:	PHONE: (386)668-6720					
CONTACT NAME: Larry V	Neiss	PHONE:						
REMITTANCE YEAR:	ENTITLE	EMENT PERIOD: 9/14/2006 (effective date)	/ 3/28/2012 (end date)					
PART I: INSPECTION COMPLIANCE STATUS (check I only one box) □ IN COMPLIANCE □ MINOR Non-COMPLIANCE □ SIGNIFICANT Non-COMPLIANCE								
PART II: TESTING/RECORDKEEPING REQUIREMENTS – Rule 62-296.401, F.A.C.								
 Was a visible emission 62-297, F.A.C.)? In order to demonstrate days prior to the AGP (Rule 62-296.401(5)(i) In order to demonstrate completed within 60 d a) Carbon Monoxide (volume, dry basis, corr 10 (Ref.: Chapter 62-2 	onable odor(s) detected? is test conducted during this s e individual source compliant Notification form submission), F.A.C.)	site visit according to EPA Method ce, was an annual visible emission n, and within 60 days prior to each ce were the remaining applicable s cation form submission? (Rule 62- elow the requirements of 100 parts y average basis and tested accordin	d 9 (Ref.: Chapter ns test conducted 60 n anniversary date? 	 Yes ⋈ No 				
 c) Particulate matter e dry standard cubic foot (Ref.: Chapter.62-297, 5. Was all emissions testic capacity? 6. Was CO & PM compli 7. Was the Department not 8. Was the required test reference 	missions test with results equ t (ft ³)of flue gas, corrected to F.A.C.)?	ual to or below the requirements o 0.7% O ₂ and tested according to El e operating at the manufacturers re- sission of a test report for an identic to the date of the last formal comp ent as soon as practical, but no lon	f 0.080 grains per PA Method 5 ecommended cal crematory unit? bliance test? nger than 45 days afte	⊠Yes □ No ⊠Yes □ No ⊠Yes □ No ⊠Yes □ No				

PART III: <u>OPERATING/RECORDKEEPING REQUIREMENTS</u> – Rule 62-296.401, F.A.C. (check ☑ appropriate box(es))

1. Is there Continuous Emissions Monitoring System (CEMS) equipment installed on each unit to record						
primary and secondary chambers where there is a 1.0 second gas residence time in the secondary chamber co						
accordance with the manufacturer's instructions?						
a) Do temperature probes seem to be properly placed?						
b) Are the following records kept on file, available for inspection for at least two years following the recording of such						
measurements, maintenance, reports and records?						
1) All measurements (including CEMS)	∐Yes ⊠ No					
2) Monitoring device	Yes 🗌 No					
3) Performance Testing Measurements	🗌 Yes 🖾 No					
4) CEMS Performance Evaluation	🗌 Yes 🔀 No					
5) All CEMS or monitoring device calibration checks	📙 Yes 🔛 No					
6) Adjustments	🗌 Yes 🖾 No					
7) Preventive maintenance performed on systems/devices	Yes 🗌 No					
8) Corrective maintenance performed on systems/devices	🛛 Yes 🗌 No					
2. Was this crematory unit constructed: (check only one 🗹 box)						
a) BEFORE August 30, 1989? (If this box checked, continue on to #3 and skip #4)						
b) ON or AFTER August 30, 1989? (If this box checked, skip #3 and continue on to #4)						
3. If constructed BEFORE August 30, 1989 is the:						
a) secondary chamber combustion zone providing at least a 1.0 second gas residence time @ 1600°F?	∐Yes ∐ No					
b) actual operating temperature of the secondary chamber combustion zone no less than 1400°F						
throughout the combustion process in the primary chamber?	Yes No					
c) cremation in the primary chamber begun after the secondary chamber combustion zone temperature						
is equal to or greater than 1400° F?	Yes No					
d) required monitoring equipment installed and operational, and providing continuous monitoring to						
record the temperature at the point or beyond where 1.0 second gas residence time is obtained in the						
secondary chamber combustion zone according to the manufacturer's instructions?	Yes No					
4. If constructed ON or AFTER August 30, 1989 is the:						
a) volume in the secondary combustion zone sufficient to provide at least a 1.0 second gas residence time						
@ 1800° F?	🛛 Yes 🗌 No					
b) the actual operating temperature of the secondary chamber combustion zone no less than $1600^{\circ}F$						
throughout the combustion process in the primary chamber?	🛛 Yes 🗌 No					
c) secondary chamber combustion zone temperature equal to or greater than 1600°F before the crematic						
process begins in the primary chamber?	🖾 Yes 🔝 No					
5. Are appropriate cremation containers containing no more than 0.5 % (percent) by weight chlorinated						
plastics used during the cremation of dead human bodies?	🛛 Yes 🗌 No					
a) If the answer to question 4 above is YES, is certifying documentation from the manufacturer that the						
are composed of 0.5% or less by weight chlorinated plastics kept on file at the site for the duration of						
their use and for at least two years after their use?	🛛 Yes 🗌 No					
b) Are there any other materials, including biomedical wastes (Rule 62-210.200, FAC) incinerated at						
this location?	🔤 Yes 🔯 No					
6. Have all crematory operators been trained and certified by a Department-approved training program?	🛛 Yes 🗌 No					
a) Are copies of the training certificates for all crematory operators kept on file at the facility for the du						
of the operator's employment & for an additional two years after termination of employment?	🛛 Yes 🗌 No					

PART IV: <u>SPECIAL CONDITIONS AND PROCEDURES</u> – Rule 62-296.401, F.A.C. A. <u>New or Modified Process Equipment</u>

1.	Since the last inspection has there been a) installation of any new process equipment?	□Yes □Yes	⊠No ⊠No
	c) replacement of existing equipment substantially different than that noted on the most recent notification form?	Yes	No
	d) If you answered <u>YES</u> to any of the above, did the owner submit a new and complete notification form and appropriate fee (Rule 62-4.050, F.A.C.) to the appropriate DEP or local program office?	□Yes	No
2.	If a crematory unit has been modified to the extent that a Department air construction permit was required, have all operators been retrained to operate the modified unit?	Yes	No
3.	In the case of new or modified equipment, where a Department air construction permit was required, has the owner submitted copies of all operator training certificates?	□Yes □Yes	⊠No ⊠No

Michael Young

Inspector's Name (Please Print)

12/12/2006

Date of Inspection

12/12/2008

Inspector's Signature

COMMENTS:

Approximate Date of Next Inspection