WHEITUL PROTECTION
States A Carton
FLORIDA

HUMAN CREMATORY



COMPLIANCE INSPECTION CHECKLIST

INSPECTION TYPE:	ANNUAL (INS1, INS2)	COMPLAINT/DISCOVER ARMS COMPLAINT NO:	Y (CI)
AIRS ID#: 0610085 DA	TE: <u>1/31/2013</u>	ARRIVE: <u>8:30</u>	DEPART: <u>10:55</u>
FACILITY NAME: SEA	AWINDS FUNERAL HOME & O	CREMATORY	
FACILITY LOCATION	1: 735 S FLEMING ST		
	SEBASTIAN 32958-50	16	
OWNER/AUTHORIZE Email:	D REPRESENTATIVE: JAME	ES YOUNG* PHONE: Mobile:	(772)562-2365
CONTACT NAME: JA Email:	AMES YOUNG*	PHONE: Mobile:	(772)562-2365
ENTITLEMENT PERIC	DD: 8/30/2012 / 8/30/2017 (effective date) (end date)		

Facility Section

PART I: INSPECTION COMPLIANCE STATUS (check I only one box)

	ART II: ONSITE INTRODUCTORY MEETING Name(s) of facility representative(s):	(check ☑ box for each	
	Brief Notes:		
2.	Is the Authorized Representative still JAMES YOUNG*?	Xes Yes	No
3.	If different, did the facility provide an administrative update within 30 days? Is the facility contact still JAMES YOUNG*? If no, who is?:	☐ Yes ⊠ Yes	□No □No
4.	Will facility be conducting VE test(s) during today's inspection?		□No □No

Emissions Unit Section <u>2 – Human Crematory-pri/2ndarychmbr,temp/opacm/r,200#/hr,NGfired</u>

n——			
PA	ART I: FILE REVIEW PRIOR TO INSPECTION	(check ☑ box for each	
1.	 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 	Xes Yes	No
3.	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	⊠ Yes ⊠ Yes	□No □No
	operation? N/A d. Date of last VE test: 1/18/2012	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
PA	ART II: <u>VISIBLE EMISSIONS TESTING</u>	(check ☑ box for each	5
	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?	box for each \bigotimes Yes \bigotimes Yes	5
	Was a visible emissions test conducted by the facility for this unit during this site visit?	box for each Yes Yes Yes Yes	question)
1.	 Was a visible emissions test conducted by the facility for this unit during this site visit?	box for each Yes Yes Yes Yes in any one-hour)	question)
1.	 Was a visible emissions test conducted by the facility for this unit during this site visit?	box for each Yes Yes Yes Yes in any one-hour) Yes Yes Yes Yes Yes	question)NoNoNoNoNoNoNo
1.	 Was a visible emissions test conducted by the facility for this unit during this site visit?	box for each Yes Yes Yes Yes in any one-hour) Yes Yes Yes Yes Yes	question)
1.	 Was a visible emissions test conducted by the facility for this unit during this site visit?	box for each Yes Yes Yes Yes in any one-hour) Yes Yes Yes Yes Yes Yes Yes	question)

PART III: MONITORING/RECORDKEEPING REQUIREMENTS	(check 🗹 box for each	2
1. Were there any objectionable odors detected?	Xes Yes	No
Downwind odor level detected-1 Wind direction - calm Upwind odor level detected-1 (1-1	0)	
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?	Xes	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

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
	 all continuous monitoring systems, monitoring devices, and performance testing measurements; monitoring system all continuous performance evaluations	 X Yes X Yes X Yes X Yes X Yes X Yes 	No No No No No
	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 ⊠ Yes	□No □No
	(1) Is the crematory unit equipped and operated with a pollutant monitoring system to automatica	lly	
	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 \square only one box for each question)

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
b. secondary chamber combustion zone temperature equal to or greater than 1400°F before the cremation	
process begins in the primary chamber? Yes	No
If the application to construct <u>ON</u> or <u>AFTER</u> 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?	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
	 a. actual operating temperature of the secondary chamber combustion zone no less than 1400°F throughout the combustion process in the primary chamber? Yes b. secondary chamber combustion zone temperature equal to or greater than 1400°F before the cremation process begins in the primary chamber? Yes If the application to construct <u>ON</u> or <u>AFTER</u> 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 b. secondary chamber combustion zone temperature equal to or greater than 1600°F throughout the combustion process in the primary chamber? Yes b. secondary chamber combustion zone temperature equal to or greater than 1600°F before the cremation

PA	ART V: <u>ALLOWED MATERIALS</u>	(check 🗹 box for each	
1.	<i>Other than</i> 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?		□No □No

PART VI: EQUIPMENT MAINTENANCE	(check ☑ box for each	
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? b. Was the flame adjusted when necessary? 		□No □No

PART VII: EU INSPECTIO	N COMPLIANCE STATUS (check	☑ only one box)
IN COMPLIANCE	MINOR Non-COMPLIANCE	SIGNIFICANT Non-COMPLIANCE

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Emissions Unit Section <u>3 – HumanCrematory-prim/2ndarychmbrs,LPG,tempM&R,opacM,300lbs/hr</u>

PART I: FILE REVIEW PRIOR TO INSPECTION	(check 🗹 for each	only one box 1 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 	Xes Yes	No
 secondary chamber combustion zone to provide for at least a 1.0 second gas residence time at 1800 degrees Fahrenheit? 2. Crematory unit installed after February 1, 2007?	\boxtimes Yes \boxtimes 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 operation? d. Date of last VE test: 		⊠No ⊠No □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 🗹	only one box

		fo	r each que	estion)
1.	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?	\square		□No □No □No
	c. The visible emission test resulted in an opacity of 0 % for the highest six minute average.			
	d. Did the visible emission test demonstrate compliance with the limit?	\boxtimes	Yes	□No
	(5% opacity, six-minute average, except that visible emissions not exceeding 15% opacity shall be allowed for up to six minutes in	n any	one-hour)	
		_		_
2.	Was a visible emissions test conducted by the inspector during this site visit?			L.No
	a. Was the test conducted with the unit operating at a capacity of one (1) adult-sized cadaver?			No
	b. Was the visible emissions test conducted according to EPA Method 9?	\boxtimes	Yes	No
	c. The visible emission test resulted in an opacity of 0 % for the highest six minute average.			
	d. Did the visible emission test demonstrate compliance with the limit?	\boxtimes	Yes	🗌No
3.	Is there any reason to ask for a special test to determine compliance with the PM and CO standard	ds?		
			Yes	□No
	If yes, what reason?			

PA	ART III: MONITORING/RECORDKEEPING REQUIREMENTS	(check 🗹 for each	only one box question)
1.	Were there any objectionable odors detected?An upwind/downwind survey of the facility was conducted. The observed parameters were:Downwind odor level detected-1Wind direction - NWUpwind odor level detected-1		⊠No
	Continuous Monitoring Systems –		
	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

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	Xes 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 ()	X Yes	No	
	4) Adjustments	Xes	No	
	5) Preventive maintenance performed on systems/devices	Xes	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	Xes Yes	No	
e.	Was the crematory unit installed after $2/1/07$? If no, skip e.(1) – (3)	Xes	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			only one box question)
1.	 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? b. secondary chamber combustion zone temperature equal to or greater than 1400°F before the cremprocess begins in the primary chamber? 	ation	□No
2.	 If the application to construct <u>ON</u> or <u>AFTER</u> 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?	ation	⊠No

PART V: <u>ALLOWED MATERIALS</u>			only one box question)
1.	<i>Other than</i> human or fetal remains with appropriate containers or clothing, are any materials, including biomedical wastes, incinerated in the unit?	🗌 Yes	XNo
2.	Do cremation containers contain no more than 0.5 % (percent) by weight chlorinated plastics as certified by the manufacturer?		□No □No

PART VI: <u>EQUIPMENT MAINTENANCE</u>		only one box a 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?	🛛 Yes	No
a. Was the flame characteristic visually checked at least once during each operating shift?b. Was the flame adjusted when necessary?		□No □No

PART VII: <u>EU INSPECTION COMPLIANCE STATUS</u> (check \square only one box)				
IN COMPLIANCE	MINOR Non-COMPLIANCE	SIGNIFICANT Non-COMPLIANCE		

Facility Section (continued)

SPECIAL CONDITIONS AND PROCEDURES	(check 🗹 box for each	only one question)
Administrative Changes: 1. Were there any changes in the name, address, or phone number of the facility or authorized representati	ve not	
 associated with a change in ownership or with a physical relocation of the facility or any emissions unit operations comprising the facility; or any other similar minor administrative change at the facility? If yes, did the facility provide written notification within 30 days of the change? 	s or	⊠No □No
New or Modified Process Equipment or Change in Ownership:		
 3. Since the last registration form submittal has there been	Yes	⊠No ⊠No ⊠No ⊠No ⊠No

Patricia Tampas and Erik Schmitt

Inspector's Name (Please Print)

Date of Inspection

1/30/2014

Inspector's Signature

Approximate Date of Next Inspection

COMMENTS:

EU 2 replaced EU 1 that was destroyed in a fire October 2009. EU2 was permitted in 2010, so there has been no repairs. This is a very busy facility that performed 2657 cremations last year. EU2 is scheduled to be rebricked.

EU 3 was just put into service on January 18, 2013. This is the initial VE on this unit. The operator loaded the body after the temp in the secondary chamber reached 1600degrees. However, the temperature dropped and the primary started before the secondary recovered. The inspector noted that at one point, the primary read 726 and the secondary 1447 degrees. The facility has contacted the engineer who will arrange to have the new unit adjusted so it performs without violating state rules. It was noted that in no time there were any visible emissions from this unit. The facility manager will submit evidence once this malfunction is corrected.