

ANIMAL CREMATORY



COMPLIANCE INSPECTION CHECKLIST

INSPECTION TYPE: ANNUAL (INS1, INS2) COMPLAINT/DISCOVERY (CI) RE-INSPECTION (FUI) ARMS COMPLAINT NO:			
AIRS ID#: 0830150 DATE: <u>2/6/14</u> ARRIVE: <u>9:00 am</u> DEPAR	RT: <u>9:00 am</u>		
FACILITY NAME: CENTRAL FLORIDA PET CREMATORY			
FACILITY LOCATION: 10725 SE 36TH AVE			
BELLEVIEW 34420-2864			
OWNER/AUTHORIZED REPRESENTATIVE: RICK ERWIN Email: belleviewvethospital@gmail.com CONTACT NAME: LISA ELLIOTT Email: CFPCC@AOL.COM ENTITLEMENT PERIOD: 2/23/2008 / 2/23/2013 (effective date) (end date) PHONE: (352)347- Mobile: PHONE: (352)307- Mobile: Facility may be operating without Enti-	-2256		
Facility Section PART I: INSPECTION COMPLIANCE STATUS (check ☑ only one box)			
☐ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPLIANCE	MPLIANCE		
PART II: ONSITE INTRODUCTORY MEETING 1. Name(s) of facility representative(s): Lisa Elliot Brief Notes:	(check ☑ only one box for each question)		
2. Is the Authorized Representative still RICK ERWIN?	⊠ Yes □No		
If different, did the facility provide an administrative update within 30 days? 3. Is the facility contact still LISA ELLIOTT?			
4. Will facility be conducting VE test(s) during today's inspection?			

Emissions Unit Section 1 - Crawford C500P Animal Cremator Unit

PART I: FILE REVIEW PRIOR TO INSPECTION	(check 🗹 box for each	only one
 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	□No
 Manufacturer's recommended capacity: 75 ☐ lbs for batch unit ☐ lbs/hr for ram-charged unit. Crematory unit installed after February 1, 2007?	Yes	⊠No
5. 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? \square N/A d. Date of last VE test: $10/24/13$ 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?		□No □No □No
If no, what was the problem (if known)?		
PART II: <u>VISIBLE EMISSIONS TESTING</u>	(check ☑ box for each	only one question)
1. Was a visible emissions test conducted by the facility for this unit during this site visit?	☐ Yes	NoNoNoNoNo
2. Was a visible emissions test conducted by the inspector during this site visit?	☐ Yes	NoNoNoNoNo
3. Is there any reason to ask for a special test to determine compliance with the PM and CO standar If yes, what reason?	rds?	⊠No

PART III: MONITORING/RECORDKEEPING REQUIREMENTS	(check ☑ box for each o	only one
1. Were there any objectionable odors detected?	☐ Yes	∑No
An upwind/downwind survey of the facility was conducted. The observed parameters were: Wind direction Downwind odor level detected Upwind odor level detected	Scale: 1-10 (v	worst)
 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? b Is the temperature probe properly placed, at least at the distance where the 1.0 second gas residence time at 1,800¹ 1,600² degrees was determined?		□No
c. Are the following records kept on file, available for inspection, for at least the past two years? (1) All temperature measurements (2) All continuous monitoring systems, monitoring devices, and performance testing measurements;	⊠ Yes	□No
monitoring system all continuous performance evaluations	✓ Yes✓ Yes✓ Yes✓ Yes✓ Yes	☐No ☐No ☐No ☐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)		□No ⊠No
control combustion based on continuous in-stack opacity measurement? (2) Is the system calibrated to restrict combustion in the primary chamber whenever any opacity 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 ☐ Yes ☐ Yes	□No □No
PART IV: SECONDARY COMBUSTION ZONE TEMPERATURES	(check 🗹 box for each	only one
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 crematic process begins in the primary chamber?		□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? b. secondary chamber combustion zone temperature equal to or greater than 1600°F before the cremating process begins in the primary chamber? 	∑ Yeson∑ Yes	□No
	(check ☑ box for each	only one
1. Besides animal remains and, if applicable, the bedding associated with the animals and appropriate contains are any other materials, including biomedical wastes, incinerated in the unit?	ainers, Yes	⊠No ⊠No

PART VI: EQUIPMENT MAINTENANCE	(check ☑ box for each	
 Is the crematory unit maintained in accordance with the manufacturer's specifications?		No No No No No
DADE VIII. EN INCEDECTION COMPLIANCE CHARTIC (1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		1
PART VII: <u>EU INSPECTION COMPLIANCE STATUS</u> (check ☑ only one box) ☐ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPL	JANCE	

Emissions Unit Section 2—Animal Cremator No. 2

DADE I. EILE DEVIEW DDIOD TO INCRECTION		
PART I: FILE REVIEW PRIOR TO INSPECTION		only one
1. a. Complete AC application or, if no AC permit, initial GP registration received on or	box for each of	question)
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. Manufacturer's recommended capacity: 75 \square lbs for batch unit \square lbs/hr for ram-charged unit.		_
3. Crematory unit installed after February 1, 2007?	⊠ Yes	□No
4. Date of last inspection: 9/21/09		
5. Past Visible Emissions (VE) tests:	₩ was	\Box No
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?	⊠ Yes □ Yes	□No □ No
c. If first year of operation, was a VE test performed within 30 days of commencing	☐ 1 es	⊠No
operation? N/A	Yes	□No
d. Date of last VE test: 10/24/13		□10
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?		□No
If no, what was the problem (if known)?	_	
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DADT II. VICIDI E EMICCIONO TECTINO		
PART II: <u>VISIBLE EMISSIONS TESTING</u>		only one
	box for each of	question)
1. Was a visible emissions test conducted by the facility for this unit during this site visit?	☐ Yes	⊠No
a. Operating capacity during test?		
b. Was the operating capacity greater than the manufacturer's recommended capacity?	☐ Yes	□No
c. Was the test conducted with the unit operating at a capacity that is representative of normal operations?	Yes	□No
d. Was the visible emissions test conducted according to EPA Method 9?	Yes Yes	□No
e. The visible emission test resulted in an opacity of % for the highest six minute average.	_	
f. 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 minible aminimum tout conducted by the improcessor during this site visit?	□ Vac	⊠No
2. Was a visible emissions test conducted by the inspector during this site visit? a. Operating capacity during test?	∐ Yes	⊠No
b. Was the operating capacity greater than the manufacturer's recommended capacity?	☐ Yes	□No
c. Was the test conducted with the unit operating at a capacity that is representative of normal operations?		□No
d. Was the visible emissions test conducted according to EPA Method 9?	Yes	□No
e. The visible emission test resulted in an opacity of % for the highest six minute average.		
f. 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		
3. Is there any reason to ask for a special test to determine compliance with the PM and CO standar	_	N
		⊠No
If yes, what reason?		

PART III: MONITORING/RECORDKEEPING REQUIREMENTS	(check ☑ box for each	only one question)
1. Were there any objectionable odors detected?	☐ Yes	⊠No
An upwind/downwind survey of the facility was conducted. The observed parameters were: Wind direction Downwind odor level detected Upwind odor level detected	Scale: 1-10 (v	
 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 ✓ Yes	□No
(Application or initial notification: \(^1\) received on or after 8/30/89; \(^2\) received before 8/30/89) c. Are the following records kept on file, available for inspection, for at least the past two years? (1) All temperature measurements	⊠ Yes	□No
monitoring system all continuous performance evaluations	X Yes	No No 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) (1) Is the crematory unit equipped and operated with a pollutant monitoring system to automatical control combustion based on continuous in-stack opacity measurement?		□No □No
(2) Is the system calibrated to restrict combustion in the primary chamber whenever any opacity exceeds 15% opacity?	Yes	□No
PART IV: SECONDARY COMBUSTION ZONE TEMPERATURES	(check 🗹 box for each	only one
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 cremat process begins in the primary chamber?		□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? b. secondary chamber combustion zone temperature equal to or greater than 1600°F before the cremat process begins in the primary chamber?		□No
	(check 🗹	only one
PART V: <u>ALLOWED MATERIALS</u> 1. Besides animal remains and, if applicable, the bedding associated with the animals and appropriate con	box for each	•
	box for each	·

		(check only one	
PART VI: <u>EQUIPMENT MAINTENANCE</u>		box for each	question)
 Is the crematory unit maintained in accordance with the manufa Is there a written plan onsite which addresses the operating proc shutdown and malfunction? Does the crematory allow for a visible check on the flame chara If no, skip a. – b. a. Was the flame characteristic visually checked at least once does. Was the flame adjusted when necessary? 	edures during startup, cteristics? uring each operating shift?		□No □No □No □No □No
PART VII: EU INSPECTION COMPLIANCE STATUS (chec	orly one boy)		
☐ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE		IANCE	
Z IN COMPLIANCE MINOR NOII-COMPLIANCE	SIGNIFICANT NOII-COMPL	IMICE	
Facility Section SPECIAL CONDITIONS AND PROCEDURES	n (continued)	(check ☑	only one
_		box for each	
Administrative Changes:			
 Were there any changes in the name, address, or phone number associated with a change in ownership or with a physical relocal operations comprising the facility; or any other similar minor ad If yes, did the facility provide written notification within 30 day 	tion of the facility or any emissions unit ministrative change at the facility?	ts or Yes	⊠No □No
New or Modified Process Equipment or Change in Ownership:			
3. Since the last registration form submittal has there been a. Installation of any new process equipment? b. Alterations to existing process equipment without replace. Replacement of existing equipment with equipment that d. A change in ownership?	cement? t is substantially different? n form and the appropriate fee	Yes Yes	NoNoNoNoNoNoNo
Patrick Farris	2/6/14		
Inspector's Name (Please Print)	Date of Inspection		
Takich Samo			
Inspector's Signature	Approximate Date of Next Insp	ection	

COMMENTS: At the time of the inspection, the facility's entitlement had expired. The facility renewed the entitlement on 2/11/14, which closed the violation and the facility was returned to compliance without formal enforcement.