

## Florida Department of Environmental Protection

Northwest District Office 2353 Jenks Avenue Panama City, Florida 32405-4389 Rick Scott Governor

Jennifer Carroll
Lt. Governor

Herschel T. Vinyard, Jr. Secretary

March 28, 2011

BY ELECTRONIC MAIL steve@wilsonfuneralhome.net

Mr. Steve Wilson, III President Wilson Funeral Home, Inc. 214 Airport Road Panama City, Florida 32405

Dear Mr. Wilson:

On February 25 2011, a Department representative with the Air Resource Management Program inspected the Seaside Crematory ID 0050081. A copy of the inspection report is enclosed. The inspection and a review of Department records indicate the facility was in compliance at the time of the inspection for those items specifically noted in the inspection report.

This letter applies only to activities covered by the Air Resource Management Program. If you have any questions, please contact C. Mark Sumner at 850/767-0046, or <a href="mark.c.sumner@dep.state.fl.us">mark.c.sumner@dep.state.fl.us</a>.

Sincerely,

Sally M. Cooey

Panama City Branch Administrator

SMC/ms

Enclosure

c: Ms. Mary Beth Curle, FDEP Pensacola (<u>mary.beth.curle@dep.state.fl.us</u>)
Ms. Carol Melton, FDEP Pensacola (<u>carol.melton@dep.state.fl.us</u>)



## **HUMAN CREMATORY**



## COMPLIANCE INSPECTION CHECKLIST

INSPECTION TYPE: ANNUAL (INS1, INS2) RE-INSPECTION (FUI)	COMPLAINT/DISCOVERY ARMS COMPLAINT NO:	Y (CI)						
AIRS ID#: 0050081 DATE: <u>2/25/2011</u>	ARRIVE: <u>8:38</u>	DEPART: <u>10:02</u>						
FACILITY NAME: SEASIDE CREMATORY								
FACILITY LOCATION: 214 AIRPORT RD								
PANAMA CITY 324	405							
OWNER/AUTHORIZED REPRESENTATIVE: J. S. Email: CONTACT NAME: Steve Wilson Email: steve@wilsonfuneralhome.net ENTITLEMENT PERIOD: 4/6/2009 / 4/6/2014 (effective date) (end date)	S. WILSON PHONE: Mobile: PHONE: Mobile:	(850)785-5272						
Facility Section								
PART I: INSPECTION COMPLIANCE STATUS (check ✓ only one box)  ☑ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPLIANCE								
PAPETI. ONGUE INTRODUCTORY MEETING								
PART II: ONSITE INTRODUCTORY MEETING  1. Name(s) of facility representative(s): Steve Wilson		(check <b>☑</b> only one box for each question)						
Brief Notes: I met with Steve Wilson and the represe	entative from HS&E who performe	ed a VE test at the time of this inspection.						
2. Is the Authorized Representative still J WILSON? If no, who is?: NA		YesNo						
3. Is the facility contact still Steve WilsonIf no, who is?: <u>NA</u>								
4. Will facility be conducting VE test(s) during today's If yes, was the compliance authority notified at least 1								

## Emissions Unit Section 1 – Human Crematory-Model IE43-Power-Pak II

PA	ART 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
3.	Crematory unit installed after February 1, 2007?  Date of last inspection: 2/25/2010  Past Visible Emissions (VE) tests:	Yes	⊠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? 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: 2/25/2011	☐ 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?	Yes Yes	□No □No
PA	ART 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?  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?  c. The visible emission test resulted in an opacity of 0 % for the highest six minute average.	⊠ Yes	□No □No □No
	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?  a. Was the test conducted with the unit operating at a capacity of one (1) adult-sized cadaver?  b. Was the visible emissions test conducted according to EPA Method 9?  c. The visible emission test resulted in an opacity of % for the highest six minute average.	☐ Yes	⊠No □No □No
3.	d. Did the visible emission test demonstrate compliance with the limit? ————————————————————————————————————	rds?	□No □No
	If yes, what reason? NA Note: Part II 2. (a)(b)(c)(d) are not applicable for this facility at this time.	∐ Yes	<u></u> 1 <b>\</b> 0
PA	ART 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:  Downwind odor level detected- 0 Wind direction - NW Upwind odor level detected-0 (1-	10)	
	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
ı	time at $\boxtimes 1,800^1$ $\square 1,600^2$ degrees was determined?	Yes	□No

PART III: MONITORING/RECORDKEEPING REQUIREMENTS (continued)		
TAKI III. MONTONI ONE ONE AND		
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 - ⊠ Yes ⊠ Yes	□No □No □No
5) Preventive maintenance performed on systems/devices 6) Corrective maintenance performed on systems/devices	<ul><li>✓ Yes</li><li>✓ Yes</li></ul>	□No □No
<ul> <li>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</li> <li>e. Was the crematory unit installed after 2/1/07? If no, skip e.(1) – (3)</li></ul>	☐ Yes	□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	☐ 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?		□No
Note: Part III 2. e. (1)(2)(3) are not applicable for this facility at this time.		
PART IV: SECONDARY COMBUSTION ZONE TEMPERATURES	(check <b>☑</b> box for each	only one 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?  b. secondary chamber combustion zone temperature equal to or greater than 1400°F before the cremati process begins in the primary chamber?		□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 <b>1600°F</b> throughout the combustion process in the primary chamber?	∠ Yes	
b. secondary chamber combustion zone temperature equal to or greater than 1600°F before the cremati process begins in the primary chamber?  Note: Part IV 1. (a)(b) are not applicable for this facility at this time.	tion Yes	□No
PART V: <u>ALLOWED MATERIALS</u>	(check <b>☑</b> box for each	only one question)
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 Yes	□No

PART VI: <u>EQUIPMENT MAINTENANCE</u>		(check <b>✓</b> box for eac	only one h question)		
Is the crematory unit maintained in accordance with the m	nanufacturer's specifications?	- 🛛 Yes	□No		
2. Is there a written plan onsite which addresses the operating shutdown and malfunction?		<del></del>	□No		
3. Does the crematory allow for a visible check on the flame If no, skip a. – b.			⊠No		
a. Was the flame characteristic visually checked at least o     b. Was the flame adjusted when necessary?			□No □No		
Note: Part VI 3. (a)(b) is not applicable for this facility	at this time.				
PART VII: EU INSPECTION COMPLIANCE STATUS	(check ✓ only one boy)				
IN COMPLIANCE MINOR Non-COMPLIA		LIANCE			
MINOR NON-COMPLIA	ANCE SIGNIFICANT NON-COMP	LIANCE			
Facility Section (continued)					
SPECIAL CONDITIONS AND PROCEDURES		(check 🗹 box for each	only one ch 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? YesNo  2. If yes, did the facility provide written notification within 30 days of the change?					
New or Modified Process Equipment or Change in Ownership	<u>p</u> :				
3. Since the last registration form submittal has there been  a. Installation of any new process equipment?  b. Alterations to existing process equipment without replacement?  c. Replacement of existing equipment with equipment that is substantially different?			<ul><li>□No</li><li>□No</li><li>□No</li><li>□No</li></ul>		
d. A change in ownership?  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?			⊠No □No		
Note: Special Conditions and Procedures Parts 2.		<u> </u>	<del>_</del>		
C.ark Sumner	February 25,2011				
Inspector's Name (Please Print)	Date of Inspection				
Mark Ser	February 2012				
Inspector's Signature	Approximate Date of Next In	spection			

**COMMENTS:** This facility operates an Industrial Equipment and Endineering company dual chambered gas fired human crematory incinerator model IE43- Power Pak II. As describes by the operator the unit is set to run at 1775 degrees in the secondary

combustion chamber, and a random review of the temperature recording charts revealed that the temperature was at least 1600 degrees for all cremations.

This unit was constructed in 2005, and the current entitlement period for the general permit will end April 6, 2014.

The unit was operating at the time of this inspection, no odors or visible emissions were noticed during this inspection.

At the time of this inspection a VE test was being performed by HS&E Resoutces in accordance with EPA method 9. The Department was notified of the VE testing on 2/7/2011.

The cremation containers used at this facility were manufactured by McDonald Container, and the facility has documentation on file from the manufacturer certifying that the containers are composed of 0.5% or less by weight chlorinated plastics.

A copy of Mr. Steve Wilson III's training certificate was on file and avaliable for review.

The facility appears clean and well maintained. All requested records were avaliable onsite for immediate review.

The cremation unit was last serviced and calibrated my Mathew's Cremation Services on 10/8/2010.