



HUMAN CREMATORY



COMPLIANCE INSPECTION CHECKLIST

INSPECTION TYPE: ANNUAL (INS1, INS2) COMPLAINT/DISCOVERY (CI)
 RE-INSPECTION (FUI) ARMS COMPLAINT NO: _____

AIRS ID#: 0850137 DATE: 1/3/08 ARRIVE: 12:50 PM DEPART: 3:45 PM
 FACILITY NAME: MARTIN FUNERAL HOME AND CREMATORY
 FACILITY LOCATION: 961 South Kanner Hwy
 STUART 34994
 OWNER/AUTHORIZED REPRESENTATIVE: DAVID SEYFFART PHONE: (772)223-5550
 CONTACT NAME: _____ PHONE: _____
 ENTITLEMENT PERIOD: 2/16/2004 / 2/16/2009
 (effective date) (end date)

PART I: INSPECTION COMPLIANCE STATUS (check only one box)
 IN COMPLIANCE MINOR Non-COMPLIANCE SIGNIFICANT Non-COMPLIANCE

PART II: TESTING/RECORDKEEPING REQUIREMENTS – Rule 62-296.401, F.A.C.
 (check appropriate box(es))

1. Were there any objectionable odor(s) detected?----- Yes No
2. Was a visible emissions test conducted during this site visit according to EPA Method 9 (Ref.: Chapter 62-297, F.A.C.)?----- Yes No
3. In order to demonstrate individual source compliance, was an annual visible emissions test conducted 60 days prior to the AGP Notification form submission, and within 60 days prior to each anniversary date? (Rule 62-296.401(5)(i), F.A.C.)----- Yes No
4. In order to demonstrate individual source compliance were the remaining applicable standards testing completed within 60 days prior to the AGP Notification form submission? (Rule 62-210.300(4), F.A.C.) Yes No
 - a) Carbon Monoxide (CO) emissions equal to or below the requirements of 100 parts per million by volume, dry basis, corrected to 7% O₂ on an hourly average basis and tested according to EPA Method 10 (Ref.: Chapter 62-297, F.A.C.)?----- Yes No
 - b) Oxygen test performed according to EPA Method 3 (Ref.: Chapter 62-297, F.A.C.)?----- Yes No
 - c) Particulate matter emissions test with results equal to or below the requirements of 0.080 grains per dry standard cubic foot (ft³) of flue gas, corrected to 7% O₂ and tested according to EPA Method 5 (Ref.: Chapter 62-297, F.A.C.)?----- Yes No
5. Was all emissions testing conducted with the source operating at the manufacturers recommended capacity?----- Yes No
6. Was CO & PM compliance demonstrated by submission of a test report for an identical crematory unit? Yes No
7. Was the Department notified at least 15 days prior to the date of the last formal compliance test?----- Yes No
8. Was the required test report filed with the Department as soon as practical, but no longer than 45 days after the test was completed?----- Yes No

PART III: OPERATING/RECORDKEEPING REQUIREMENTS – 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 temperatures in the primary and secondary chambers where there is a 1.0 second gas residence time in the secondary chamber combustion zone in accordance with the manufacturer's instructions?----- Yes No
 - a) Do temperature probes seem to be properly placed?----- Yes No
 - 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°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 cremation 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 they 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?
 - a) Are copies of the training certificates for all crematory operators kept on file at the facility for the duration of the operator's employment & for an additional two years after termination of employment?----- Yes No

Cont.

temperature dropped below 1600°F for 5 to 20 minutes. This was most evident for the first cremation of the day, ~~within the~~ shortly after combustion ~~temperature~~ ^{AX} was started.

- ④ Reviewed records from 1/07 - 12/07.
- ⑤ FDEP permission was granted to conduct UF testing after December 2006 (test also conducted in Feb 2006)
- ⑥ Flite Rite Industries
1321C NW 65th Place
Ft. Lauderdale, FL 33309
1-800-925-9581

★ A call to Flite Rite on 2/1/08 indicates that the platforms are intended to be burned. The nylon straps can be cut off prior to combustion.



SE DISTRICT DEPARTMENT OF ENVIRONMENTAL PROTECTION

Visible Emission Observation Form

SOURCE NAME			OBSERVATION DATE				START TIME		STOP TIME				
Merlin Funeral Home & Crematory			1/31/08				2:48 PM		2:58 PM				
ADDRESS			SEC	0	15	30	45	SEC	0	15	30	45	
961 Kanner Highway			MIN					MIN					
CITY			1	0	0	0	0	31					
STATE			2	0	0	0	0	32					
ZIP			3	0	0	0	0	33					
PHONE			4	0	0	0	0	34					
SOURCE ID NUMBER			5	0	0	0	0	35					
PROCESS EQUIPMENT			6	0	0	0	0	36					
OPERATING MODE			7	0	0	0	0	37					
CONTROL EQUIPMENT			8	0	0	0	0	38					
OPERATING MODE			9	0	0	0	0	39					
DESCRIBE EMISSION POINT			10	0	0	0	0	40					
START			11					41					
STOP			12					42					
HEIGHT ABOVE GROUND LEVEL			13					43					
START			14					44					
STOP			15					45					
HEIGHT RELATIVE TO OBSERVER			16					46					
START			17					47					
STOP			18					48					
DISTANCE FROM OBSERVER			19					49					
START			20					50					
STOP			21					51					
DIRECTION FROM OBSERVER			22					52					
START			23					53					
STOP			24					54					
DESCRIBE EMISSIONS			25					55					
START			26					56					
STOP			27					57					
EMISSION COLOR			28					58					
START			29					59					
STOP			30					60					
PLUME TYPE: CONTINUOUS <input type="checkbox"/>			AVERAGE OPACITY FOR HIGHEST PERIOD 0									NUMBER OF READINGS ABOVE 0 % WERE 0	
FUGITIVE <input type="checkbox"/>			RANGE OF OPACITY READINGS MINIMUM 0 MAXIMUM 0										
INTERMITTENT <input type="checkbox"/>			OBSERVER'S NAME (PRINT) Allen Rainey									OBSERVER'S SIGNATURE	
IF WATER DROPLET PLUME ATTACHED <input type="checkbox"/>			OBSERVER'S SIGNATURE Allen Rainey									DATE 1/31/08	
DETACHED <input type="checkbox"/>			ORGANIZATION SE District DEP									CERTIFIED BY ETA	
POINT IN THE PLUME AT WHICH OPACITY WAS DETERMINED			I HAVE RECEIVED A COPY OF THESE OPACITY OBSERVATIONS SIGNATURE									DATE 1/9/08	
START			TITLE									VERIFIED BY	
STOP			DATE									DATE	

Source Layout Sketch Draw North Arrow

