

HUMAN CREMATORY



COMPLIANCE INSPECTION CHECKLIST

INSPECTION TYPE: ANNUAL (INS1, INS2)	
AIRS ID#: 0210099 DATE: 04/16/08 ARRIVE: 09:45 DEPART: 10:58 FACILITY NAME: NAPLES MEMORIAL GARDENS CREMATORY FACILITY LOCATION: 525 111th Avenue North NAPLES, FL 34108 OWNER/AUTHORIZED REPRESENTATIVE: STEVEN SCHWINGHAMER PHONE: (239)597-316 CONTACT NAME: Keith Wilson PHONE: (239)597-31 ENTITLEMENT PERIOD: 6/24/2004 / 6/24/2009 (effective date) (end date)	01
PART I: INSPECTION COMPLIANCE STATUS (check ✓ only one box) ☐ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPLIANCE	
 Was a visible emissions test conducted during this site visit according to EPA Method 9 (Ref.: Chapter 62-297, F.A.C.)?	☐Yes ⊠ No ☐Yes ⊠ No
	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 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 re	cording of such
measurements, maintenance, reports and records?	cording or such
1) All measurements (including CEMS)	⊠Ves □ No
2) Monitoring device	Yes No
3) Performance Testing Measurements	
4) CEMS Performance Evaluation	
5) All CEMS or monitoring device calibration checks	
6) Adjustments	
7) Preventive maintenance performed on systems/devices	
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
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4. If constructed <u>ON</u> or <u>AFTER</u> August 30, 1989 is the:	
a) volume in the secondary combustion zone sufficient to provide at least a 1.0 second gas residence tir	
	⊠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 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: SPECIAL CONDITIONS AND PROCEDU A. New or Modified Process Equipment	<u>RES</u> – Rule 62-296.401, F.A.C.
 Since the last inspection has there been a) installation of any new process equipment? b) alterations to existing process equipment wit c) replacement of existing equipment substantiation form? d) If you answered <u>YES</u> to any of the above, dinotification form and appropriate fee (Rule of local program office?	thout replacement? ally different than that noted on the most
 2. If a crematory unit has been modified to the exter was required, have all operators been retrained to 3. In the case of new or modified equipment, where required, has the owner submitted copies of all o a) submitted within the 15 day required window 	nt that a Department air construction permit o operate the modified unit? a Department air construction permit was operator training certificates?
Wayne Lewis	04/16/08
Inspector's Name (Please Print)	Date of Inspection
Inspector's Signature	Approximate Date of Next Inspection
COMMENTS:	