

HUMAN CREMATORY



COMPLIANCE INSPECTION CHECKLIST

INSPECTION TYPE: ANNUAL (INS1, INS2) COMPLAINT/DISCOVERY (CI) RE-INSPECTION (FUI) ARMS COMPLAINT NO:					
AIRS ID#: 0910093 DATE: <u>6/5/09</u> ARRIVE: <u>9:42 AM</u> DEPART: <u>10:18</u>	AM				
FACILITY NAME: CRESTVIEW CREMATORY					
FACILITY LOCATION: 436B W James Lee Blvd					
CRESTVIEW 32536					
OWNER/AUTHORIZED REPRESENTATIVE: ANDERSON POWELL PHONE: (850)682-3052					
CONTACT NAME: Bob Lloyd, operator PHONE: (850)682-3052					
ENTITLEMENT PERIOD: 6/14/2007 / 6/14/2012					
(effective date) (end date)					
PART I: INSPECTION COMPLIANCE STATUS (check ☑ only one box) □ IN COMPLIANCE ☑ MINOR Non-COMPLIANCE □ SIGNIFICANT Non-COMPLIANCE					
PART II: <u>TESTING/RECORDKEEPING REQUIREMENTS</u> – Rule 62-296.401, F.A.C. (check ☑ appropriate box(es))					
 Were there any objectionable odor(s) detected? 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?	□Yes ⊠ No				
 (Rule 62-296.401(5)(i), F.A.C.)					
 b) Oxygen test performed according to EPA Method 3 (Ref.: Chapter 62-297, F.A.C.)?	⊠Yes □ No ⊠Yes □ No				
 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.)?					
 capacity? 6. Was CO & PM compliance demonstrated by submission of a test report for an identical crematory unit? 7. Was the Department notified at least 15 days prior to the date of the last formal compliance test? 	⊠Yes □ No ⊠Yes □ No				
8. Was the required test report filed with the Department as soon as practical, but no longer than 45 days aft the test was completed?	er ⊠Yes □ No				

PART III: <u>OPERATING/RECORDKEEPING REQUIREMENTS</u> – Rule 62-296.401, F.A.C. (check ☑ appropriate box(es))

 Is there Continuous Emissions Monitoring System (CEMS) equipment installed on each unit to record primary and secondary chambers where there is a 1.0 second gas residence time in the secondary chamber of accordance with the manufacturer's instructions?	ombustion zone in ⊠Yes □ No ⊠Yes □ No			
measurements, maintenance, reports and records? 1) All measurements (including CEMS) 2) Monitoring device	 Xes No Yes No 			
b) \square <u>ON</u> or <u>AFTER</u> August 30, 1989? (If this box checked, skip #3 and continue on to #4)				
 3. If constructed <u>BEFORE</u> 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? c) cremation in the primary chamber begun after the secondary chamber combustion zone temperature 	Yes No			
 is equal to or greater than 1400°F?	□Yes □ No □Yes □ No			
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 tin @ 1800° F? 	ne Xes 🗌 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?				
 Are appropriate cremation containers containing no more than 0.5 % (percent) by weight chlorinated plastics used during the cremation of dead human bodies? 	\boxtimes Yes \square 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 or their use and for at least two years after their use? 	y			
b) Are there any other materials, including biomedical wastes (Rule 62-210.200, FAC) incinerated at this location?	$\Box Yes \boxtimes No$			
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 du	Yes 🗍 No			
of the operator's employment & for an additional two years after termination of employment?	⊠Yes □ No			

PART IV: SPECIAL CONDITIONS AND PROCEDURES - Rule 62-296.401, F.A.C. A. New or Modified Process Equipment

1.	Since the last inspection has there been		
	a) installation of any new process equipment?	Yes	No
	b) alterations to existing process equipment without replacement?	Yes	No
	c) replacement of existing equipment substantially different than that noted on the most		
	recent notification form?	Yes	No
	d) If you answered <u>YES</u> to any of the above, did the owner submit a new and complete		
	notification form and appropriate fee (Rule 62-4.050, F.A.C.) to the appropriate DEP or		
	local program office?	Yes	No
2.	If a crematory unit has been modified to the extent that a Department air construction permit		
		Yes	No
3.	In the case of new or modified equipment, where a Department air construction permit was	_	
	required, has the owner submitted copies of all operator training certificates?	Yes	No
	a) submitted within the 15 day required window following the training?	Yes	No

Jennifer Waltrip

Inspector's Name (Please Print)

s Signature

Date of Inspection

June 5, 2009

June 2010

Approximate Date of Next Inspection

COMMENTS:

A Department representative met with Mr. Bob Lloyd, cremation unit operator, on June 5, 2009 for the unannounced annual air program compliance inspection. The cremation unit was not in operation during the time of the inspection.

Mr. Lloyd stated that the unit is loaded when the temperature reaches 1600°F. Circle charts were available on site and reviewed for compliance with the continuous monitoring requirements.

Mr. Lloyed stated that he inspects the unit at least once every two months. A log of the inspections and any repairs made to the unit was not available for review during this inspection. The logs were discussed during the inspection and Mr. Lloyd stated that he would begin logging all inspections and repairs on the unit.

The unit is equipped with an opacity meter; however, calibration records were not available. Mr. Lloyd stated that he would call the manufacturer to discuss calibrating the opacity meter.

A visible emission (VE) test was last performed on March 5, 2009 and resulted in an average opacity of 0%.