

## <u>HUMAN CREMATORY</u> COMPLIANCE INSPECTION CHECKLIST



INSPECTION TYPE: ANNUAL (INS1, INS2) 🗵 COMPLAINT/DISCOVERY (CI) 📋						
RE-INSPECTION (FUI) ARMS COMPLAINT NO:						
FA	CILITY: Veterans Funeral Care		DISTRICT:			
DE	BA/Site Name:		Southwest			
ΑI	<b>DDRESS:</b> 15381 Roosevelt Bou	levard	CONTACT PHONE:			
	Clearwater, FL		727-467-0922			
AF	RMS NO:	PERMIT NO:	<b>Expiration Date:</b>	9/17/16		
	1030512 001	1030512-003-AG	Renewal Date:	8/18/16		
	1030312 001	1030312-003-AG	Test Date:	12/20/00		
<i>EMISSION UNIT DESCRIPTION:</i> Model IEE Power-Pak II. Maximum capacity of 750 pounds, loads greater than 300 pounds requires special operating procedures. Secondary (afterburner) chamber has a minimum temperature of 1600 degrees F. Training by Grove Scientific/Luis Llorens						
IN	SPECTION DATE:	INSPECTION COMPLIANCE STATUS (cl	neck 🗆 only one box)			
ç	9/4/13		iance; Significant l	Non-Compliance		
		PART I: General Review:				
1.	Permit File Review			⊠Yes □ No		
2.	Introduction and Entry			⊠Yes □ No		
	<i>Comments:</i> I met with Mr. Blair Kriever who escorted me on a walk through inspection, answered my most of my questions, and provided the requested documentation. I also met with operator Mr. Jim Orndoff, who answered other questions during the inspection.					
3.	Is the Authorized Representative st			⊠Yes □ No		
	Comments: Mr. Rudloph is the ow					
4	The e-mail address is: jimrudolpho	-				
4.	4. Is the facility contact still: James Rudolph?  **Comments:* Mr. Blair Kriever stated that he may be a more appropriate facility contact although Mr. Rudolph is still the official contact per the FDEP Registration. Mr. Kriever is the funeral director at the facility and typically has correspondence with PCAQD. Mr. Kriever is knowledgeable of the day to day operations at the facility. On 9/12/13 via phone, Mr. Kriever stated that he will contact his environmental consultant to submit an administrative change for facility contact designation. The e-mail address is: blair.veterans@gmail.com					
5.	5. If the answer to 3 or 4 is "No", did the facility provide an administrative update within 30 days?  [62-210.310(2)(d), F.A.C.]					
PART II: <u>TESTING REQUIREMENTS</u> – Rule 62-296. 401(5), F.A.C. (check □ appropriate box(es), if a shaded box is checked, this would indicate noncompliance)						
Compliance Demonstration [62-296.401(5)(h), F.A.C.]						
1.	☐ New Facility / ☐ New Process Equipment—  Did this facility demonstrate initial compliance no later than 30 days after beginning operation? ☐ Yes ☐ No					
2.	<b>Existing Facilities</b> Was an annual visible emissions compliant	ance test conducted on each crematory unit for	each calendar year:	🛛 Yes 🔲 No		
1.	minute average, except that visible emis six minutes in any one-hour period? [62]	(s) demonstrate compliance with the 5 percent of sions not exceeding 15% opacity shall be allow 2-296.401(5)(b)1., F.A.C.]	ed for up to	🛚 Yes 🔲 No		

PART II: <u>TESTING REQUIREMENTS</u> – Rule 62-296. 401(5), F.A.C.					
_	(check $\square$ appropriate box(es), if a shaded box is checked, this would indicate noncompliance)				
2.			_		
3.		$\boxtimes$ Yes	☐ No		
4.	Was the required test report filed with the department as soon as practical, but no later than 45 days after the test was completed? [62-297.310(8)(b)	⊠ Yes	☐ No		
5.	Was the facility visible emissions test(s) conducted according to EPA Method 9? [62-297.401(9)(c), F.A.C]	⊠ Yes	☐ No		
6.	Was a visible emissions test(s) conducted by the inspector during this site visit according to EPA Method 9?a) The visible emission test resulted in an opacity of% for the highest six minute average. b) Did the test indicate the facility is operating in compliance with the opacity standard?				
7.	Is there any reason to ask for a special test to determine compliance with the PM and CO standards?				
	PART III: OPERATING/RECORDKEEPING REQUIREMENTS				
	(check $\square$ appropriate box(es), if a shaded box is checked, this would indicate noncompliance)				
1.	Were there any objectionable odor(s) detected?	$\square$ $V_{as}$	⊠ No		
1.	An upwind/downwind survey of the facility was conducted. The observed parameters were:  Downwind odor level detected- $\underline{}$ Wind direction - $\underline{}$ Upwind odor level detected- $\underline{}$ (1-10)		ĭ NO		
2.	<ul> <li>Continuous Monitoring System - [62-296.401(5)(i), F.A.C.]</li> <li>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?</li></ul>				
	recording of such measurements, maintenance, reports and records?  1) All temperature measurements				
	monitoring system all continuous performance evaluations	⊠ Yes ⊠ Yes ⊠ Yes	<ul><li> No</li><li> No</li><li> No</li><li> No</li></ul>		
	<ul> <li>7) 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></ul>	$\boxtimes$ Yes	$\square$ No		
	9) Was the crematory unit installed after $2/1/07$ ? If yes, go to 9) a) – c)a) Is the crematory unit equipped and operated with a pollutant monitoring system to automatically	☐ Yes	⊠ No		
	control combustion based on continuous in-stack opacity measurement?				
	exceeds 15% opacity?				
	1 – Application received on or after 8/30/89; 2 – Application received prior to 8/30/89	_			
3.	Was this crematory unit application to construct: [62-296.401(5)(c), F.A.C.] (check only one □ box) a) □ <u>BEFORE</u> August 30, 1989? (If this box checked, continue on to #4 and skip #5) b) □ <u>ON</u> or <u>AFTER</u> August 30, 1989? (If this box checked, skip #4 and continue on to #5)				
4.	a) secondary chamber combustion zone providing at least a 1.0 second gas residence time @ 1600°F? 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		
	is equal to or greater than $1400^{\circ}F$ ?	$\square$ Yes	$\square$ No		

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PART III: <u>OPERATING/RECORDKEEPING REQUIREMENTS</u>					
(check   appropriate box(es), if a shaded box is checked, this would indicate noncompliance)	)				
5. If the application to construct <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 time					
@ 1800° F?	- ⊠ Yes □ No				
b) actual operating temperature of the secondary chamber combustion zone no less than $1600^{o}F$	_				
throughout the combustion process in the primary chamber?	- 🛛 Yes 🔲 No				
c) secondary chamber combustion zone temperature equal to or greater than $1600^{\circ}F$ before the cremation process begins in the primary chamber?	$\nabla V_{ac} \square N_0$				
process vegins in the primary chamber:	- I les I wo				
A series and the series and the series and the series of t					
6. Are appropriate cremation containers containing no more than 0.5 % (percent) by weight chlorinated plastics used during the cremation of dead human bodies, as demonstrated by MSD sheet?	- Nes No				
[62-296.401(5)(d), F.A.C.]	7 100				
a) If the answer to question 6 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?b) Are there any other materials, including biomedical wastes (Rule 62-210.200, FAC) incinerated at	- 🔀 Yes 🔲 No				
this location?	- ∏ Yes ⊠ No				
PART IV: Equipment Maintenance					
(check □ appropriate box(es), if a shaded box is checked, this would indicate noncompliance)	)				
<b>Equipment Maintenance:</b> – [62-296.401(5)(e), F.A.C.]					
1 I d an anti-construction of the construction	$V = \square M_{\alpha}(SC)$				
1. Is the crematory unit maintained in accordance with the manufacturer's specifications? 🖂 🛚					
2. Are there maintenance/repair/adjustment records kept onsite for at least 2 years?	- ⊠ Yes □ No				
3. Is there a written plan onsite which addresses the operating procedures during startup,					
shutdown and malfunction?	- X Yes No				
4. Does the crematory allow for a visible check on the flame characteristics?	- ∐ Yes ⊠ No				
a) Was the flame characteristic visually checked at least once during each operating shift?	- □ Yes □ No				
b) Was the flame adjusted when necessary?	- Yes No				
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PART V: Special Conditions And Procedures (check $\Box$ appropriate box(es), if a shaded box is checked, this would indicate noncompliance)					
Administrative Changes:  1. Were there any change 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					
2. If yes, did the facility provide written notification within 30 days of the change? [62-210.310(2)(d), F.A.C.]	- Yes No				
Permit Effective Period – $[62-210.310(3)(a), F.A.C.]$					
1. Is the general permit for this facility still within the 5 year effective period?	- 🛛 Yes 🔲 No				
2. Did the facility submit the new re-registration form at least 30 days prior to permit expiration?	- 🗌 Yes 🔲 No				
New or Modified Process Equipment or Change in Ownership - [62-210.310 (2)(b)2, F.A.C]					
C Since the last registration form submittal 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 with equipment that is substantially different?					
d) A change in ownership?	- ∐ Yes ⊠ No				
have been submitted 30 days prior to the change	- Yes No				
Noncompliance Notice: - [62-210.310(3)(i), F.A.C.]					
1. Did the facility have any instances where they were unable comply with or will be unable to comply with any condition or					

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limitation of the air general permit?	Yes No(SC)				
If the answer is $\underline{Yes}$ , proceed to a) and b).					
a) Did the owner or operator provide immediate notification to the	? Department? 🔀 Yes 📋 No				
<ul><li>b) Did the notification include:</li><li>1. A description of and cause of noncompliance?</li></ul>					
2. Dates and times of noncompliance; or if not corrected, the antico					
and steps being taken to reduce, eliminate, and prevent recurren					
	·				
PART VI: Com	ments				
The inspection revealed a few instances where the secondary chamber to					
chart records and were not reported to PCAQD. 3 instances fell to only					
approximately < 2 minutes. Another instance fell to 1550 degrees and be					
(1/28/13) occurred at the end of cremation and it could be reasonable ass	sumed that combustion was complete in the primary chamber				
when the temperature drop occurred.					
The refractory of the facility's unit has been inspected by the manufactu					
has been noted being in "bad" condition and recommended for replacem					
labeled as "bad" during a 2/8/12 inspection by the manufacture. The 2/8					
baffle, roof/ throat roof. Mr. Kriever stated that he feels the unit is opera					
usage. For these reasons he has not treated the manufacture's recommen	uations as digent.				
The facility has a manufacture's maintenance service /inspection schedu					
include a calibration of the continuous temperature monitor (chart record	ler). The last chart recorder calibration was performed in				
11/19/2009.					
No VE Test was performed by the inspector because the unit was not op	erating and no cremations were planned for that day.				
The facility had proper documentation and other required records were k	ept on-site and available for inspection.				
The facility was maintained in good condition.					
Exit Interview:					
A verbal warning was given to the facility to notify PCAQD in any insta	nce of non-compnance.				
Mr. Kriever stated that he has the intention of re-building the entire refra					
situation or immediately if any operational problems are noticed. Ideally	· · · · · · · · · · · · · · · · · · ·				
but has not committed this. A verbal warning was given to Mr. Kriever that the current refractory condition could lead to non-					
compliance issues in the future.					
Brennan Farrington	9/4/13				
Inspector's Name	Date of Inspection				
	-				
	~7 /2014				
Inspector's Signature	Approximate Date of Next Inspection				

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