

Florida Department of Environmental Protection

Northwest District 160 Governmental Center, Suite 308 Pensacola, Florida 32502-5794 Charlie Crist Governor

Jeff Kottkamp Lt. Governor

Mimi A. Drew Secretary

November 29, 2010

By Electronic Mail, Received Receipt Requested trahanmortuary@yahoo.com

Mr. Dennis Trahan, Owner Pensacola Crematory 430 Beverly Parkway Pensacola, Florida 32505

Dear Mr. Trahan:

On November 19, 2010, a Department representative with the Air Resource Management Program inspected your facility, ID 0330278. 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. Please carefully review the comments section of the inspection report to ensure continued compliance in the future.

This letter applies only to activities covered by the Air Resource Management Program. If you have any questions, please contact Jennifer Waltrip at 850/595-0662 or jennifer.waltrip@dep.state.fl.us.

Sincerely,

Rick Bradburn

Air Program Administrator

Rich Bradbon

RB/jw/c

Enclosure



HUMAN CREMATORY



COMPLIANCE INSPECTION CHECKLIST

INS	SPECTION TYPE:	ANNUAL (INS1, INS2) RE-INSPECTION (FUI)	_	AINT/DISCOVER OMPLAINT NO:	Y (CI)	
AII	AIRS ID#: 0330278 DATE: <u>11/19/10</u> ARRIVE: <u>12:35 PM</u> DEPART: <u>1:35 PM</u>					
FA	CILITY NAME: PE	NSACOLA CREMATORY-	BEVERLY PKW	Y		
FA	CILITY LOCATION	430 BEVERLY PKV	WY			
		PENSACOLA 325	505			
CO	OWNER/AUTHORIZED REPRESENTATIVE: DENNIS TRAHAN Email: trahanmortuary@yahoo.com CONTACT NAME: WILLIAM D. TRAHAN Email: trahanmortuary@yahoo.com ENTITLEMENT PERIOD: 10/15/2009 / 10/15/2014 (effective date) (end date) PHONE: (850)438-6235 Mobile: Mobile:					
Facility Section PART I: INSPECTION COMPLIANCE STATUS (check ☑ only one box) ☑ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPLIANCE						
PA	RT II: ONSITE INTI	RODUCTORY MEETING	ļ		(check	✓ only one
1.	Name(s) of facility rep	oresentative(s): William D. T	_		•	ach question)
2.	If no, who is?: If different, did the fac	resentative still DENNIS TR - ility provide an administrativ	ve update within 30	0 days?	Yes	
4.	If no, who is?: Willia Will facility be conducted	till DENNIS TRAHAN? m D. Trahan cting VE test(s) during today ance authority notified at leas	's inspection?		Yes	<u></u> No

Emissions Unit Section 1 – HumanCrematory-#1prim/2ndarychmbr,temp/opacitymon,LP,150#/hr

PA	RT I: FILE REVIEW PRIOR TO INSPECTION	(check 🗹 box for each o	only one question)
1.	 a. Complete AC application or, if no AC permit, initial GP registration received on or after August 30, 1989? b. If yes, were design calculations provided then to confirm a sufficient volume in the 	⊠ Yes	□No
	secondary chamber combustion zone to provide for at least a 1.0 second gas residence time at 1800 degrees Fahrenheit?	⊠ Yes ⊠ Yes	□No □No
4.	Past Visible Emissions (VE) tests: 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?	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? If no, what was the problem (if known)?	⊠ Yes ⊠ Yes	∐No □No
PA	ART II: <u>VISIBLE EMISSIONS TESTING</u>	(check ☑ box for each of	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?	☐ Yes	⊠No □No □No
	 c. The visible emission test resulted in an opacity of % for the highest six minute average. 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?	Yes Yes	⊠No □No □No
3.	d. Did the visible emission test demonstrate compliance with the limit?		□No ⊠No
	If yes, what reason?		
PA	ART III: MONITORING/RECORDKEEPING REQUIREMENTS	(check ☑ box for each of	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- Wind direction - Upwind odor level detected-	(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
D	Is the temperature probe properly placed, at least at the distance where the 1.0 second gas residence time at $\boxtimes 1,800^1 \ \square \ 1,600^2$ degrees was determined?	⊠ Yes	□No

PART III: MONITORING/RECORDKEEPING REQUIREMENTS (continued)			
c.	Are the following records kept on file, available for inspection, for at least the past two years?	K 7	¬
	 All temperature measurements	⊠ Yes	∐No
	monitoring system all continuous performance evaluations	⊠ Yes	□No
	3) All CEMS or monitoring device calibration checks (last performed on (12/28/09)	Yes	□No
	4) Adjustments 5) Preventive maintenance performed on systems/devices	⊠ Yes ⊠ Yes	□No
	6) Corrective maintenance performed on systems/devices 6) Corrective maintenance performed on systems/devices	⊠ Yes ⊠ Yes	□No □No
А	Are the temperature charts properly documented with operator name, operator indication of		
u.	when cremation in the primary chamber was begun, date, time, and temperature markings	⊠ Yes	□No
e.	Was the crematory unit installed after $2/1/07$? If no, skip e.(1) – (3)	⊠ Yes	□No
	(1) Is the crematory unit equipped and operated with a pollutant monitoring system to automatical control combustion based on continuous in-stack opacity measurement?	ally ⊠ Yes	ПNo
	(2) Is the system calibrated to restrict combustion in the primary chamber whenever any opacity	<u> </u>	110
	exceeds 15% opacity?	Yes	□No
jı.	(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?	⊠ Yes	□No
_	accordance with the manufacturer's recommended mannenance schedule:	<u> </u>	1NU
	The second law continuous governmental arribed	(check ✓	only one
P	ART IV: SECONDARY COMBUSTION ZONE TEMPERATURES	box for each	
	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? ————————————————————————————————————	ion ☐ Yes ⊠ Yes	□No □No □No
	process begins in the primary chamber:	<u> </u>	□140
_		· · · • • • • • • • • • • • • • • • • •	. 7
PA	ART V: <u>ALLOWED MATERIALS</u>	(check b ox for each	only one question)
1.	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 ✓ box for each	only one question)		
1. Is the crematory unit maintained in accordance with the manufacturer's specifications?	- 🛛 Yes	□No		
 Is there a written plan onsite which addresses the operating procedures during startup, shutdown and malfunction?		□No □No		
a. Was the flame characteristic visually checked at least once during each operating shift? b. Was the flame adjusted when necessary?		□No □No		
PART VII: <u>EU INSPECTION COMPLIANCE STATUS</u> (check ☑ only one box)				
☐ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPLIANCE				

${\bf Emissions~Unit~Section} \\ {\bf 2-HumanCrematory-\#2prim/2ndarychmbr, temp/opacitymon, LP, 150\#/hr}$

PA	ART I: FILE REVIEW PRIOR TO INSPECTION	(check 🗹	only one
			question)
1	a. Complete AC application or, if no AC permit, initial GP registration received on or		1
1.	after August 30, 1989?	⊠ Yes	□No
	b. If yes, were design calculations provided then to confirm a sufficient volume in the	M 162	
	secondary chamber combustion zone to provide for at least a 1.0 second gas residence time		
	at 1800 degrees Fahrenheit?	⊠ Yes	□No
	Crematory unit installed after February 1, 2007?	🔯 Yes	☐No
3.	Date of last inspection: $2/4/10$		
4.	Past Visible Emissions (VE) tests:		K
	a. Was a VE test performed within each of the past 4 calendar years?		⊠No
	b. Has a VE test been performed yet within the current calendar year?	⊠ Yes	□No
	c. If first year of operation, was a VE test performed within 30 days of commencing operation?	⊠ Yes	□No
	d. Date of last VE test: 3/16/10		No
	e. Was the VE test report filed with the compliance authority no later than 45 days after the test?	⊠ Yes	□No
	f. Did the facility demonstrate compliance during the last VE test?	- X Yes	□No
	If no, what was the problem (if known)?	-	
PA	ART II: VISIBLE EMISSIONS TESTING		•
	IXI II. VISIBLE EMISSIONS TESTING	(check 🗹	only one
		box for each	question)
1.	Was a visible emissions test conducted by the facility for this unit during this site visit?		⊠No
	a. Was the test conducted with the unit operating at a capacity of one adult-sized cadaver?		No
	b. Was the visible emissions test conducted according to EPA Method 9?	- Yes	∐No
	c. The visible emission test resulted in an opacity of % for the highest six minute average.		
	d. Did the visible emission test demonstrate compliance with the limit?	- TYes	□No
	(5% opacity, six-minute average, except that visible emissions not exceeding 15% opacity shall be allowed for up to six minutes		
		,	
2.	Was a visible emissions test conducted by the inspector during this site visit?		⊠No
	a. Was the test conducted with the unit operating at a capacity of one (1) adult-sized cadaver?		No
	b. Was the visible emissions test conducted according to EPA Method 9?	- Yes	□No
	c. The visible emission test resulted in an opacity of % for the highest six minute average.	Yes	□ No
3	d. Did the visible emission test demonstrate compliance with the limit?		∐No
٦.	is there any reason to ask for a special test to determine compliance with the 1 M and CO standa	Yes	⊠No
	If yes, what reason?		
PA	ART III: MONITORING/RECORDKEEPING REQUIREMENTS	(check ☑	only one
		box for each	•
1	W d	□ V	∇ N.
1.	Were there any objectionable odors detected? An upwind/downwind survey of the facility was conducted. The observed parameters were:	- U Yes	⊠No
	Downwind odor level detected- Wind direction - Upwind odor level detected-	(1-10)	
	Downwing odor level detected wind direction - Opwing odor level detected-	(1-10)	
2.	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
b	Is the temperature probe properly placed, at least at the distance where the 1.0 second gas residence	N ***	
	time at $\boxtimes 1,800^1$ $\square 1,600^2$ degrees was determined?	⊠ Yes	∐No
	(Application of initial notification. Tecerved on of after 8/30/89, Tecerved before 8/30/89)		

PART III: MONITORING/RECORDKEEPING REQUIREMENTS (continued)		
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	ПNо
3) All CEMS or monitoring device calibration checks (last performed on ()	Yes	□No
4) Adjustments	Yes	□No
5) Preventive maintenance performed on systems/devices 6) Corrective maintenance performed on systems/devices	☐ Yes☐ Yes	∐No □No
,	☐ 1 CS	140
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	⊠ Yes	ПNо
e. Was the crematory unit installed after $2/1/07$? If no, skip e.(1) – (3)	Yes	□No
(1) Is the crematory unit equipped and operated with a pollutant monitoring system to automatical		
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?	Yes	□No
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?	⊠ Yes	П
accordance with the manufacturer's recommended maintenance schedule?	☐ i es	No
DADE W. CECCONDADY COMPUCENCY ZONE TENDED A TRIDEG	(check ☑	only one
PART IV: SECONDARY COMBUSTION ZONE TEMPERATURES	box for each	2
 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 cremation process begins in the primary chamber? 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 1600°F throughout the combustion process in the primary chamber? b. secondary chamber combustion zone temperature equal to or greater than 1600°F before the cremation process begins in the primary chamber? 	ion Yes	□No □No □No □No
	(-1,1, -7	1
PART V: <u>ALLOWED MATERIALS</u>	(check ✓	only one h question)
	OUA IOI Cuc.	
	oox for eac.	,
Other than human or fetal remains with appropriate containers or clothing, are any materials, including biomedical wastes, incinerated in the unit?	· Yes	⊠No
	Yes	,

PART VI: EQUIPMENT MAINTENANCE	(check ☑ only one box for each question)
1. Is the crematory unit maintained in accordance with the manufacturer's specifications?	\(\sum \) Yes \(\sum_{}\)No
2. Is there a written plan onsite which addresses the operating procedures during startup, shutdown and malfunction?	- -
3. Does the crematory allow for a visible check on the flame characteristics? If no, skip a. – b. a. Was the flame characteristic visually checked at least once during each operating shift? b. Was the flame adjusted when necessary?	YesNo
PARTINI THE NUMBER OF THE ANALYSIS OF THE PROPERTY OF THE PROP	
PART VII: EU INSPECTION COMPLIANCE STATUS (check ✓ only one box) ☐ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPLIANCE	COMPLIANCE
Facility Section (continued)	
SPECIAL CONDITIONS AND PROCEDURES	(check ☑ only one box for each question)
Administrative Changes: 1. Were there any changes in the name, address, or phone number of the facility or authorized rep associated with a change in ownership or with a physical relocation of the facility or any emiss operations comprising the facility; or any other similar minor administrative change at the facil If yes, did the facility provide written notification within 30 days of the change? New or Modified Process Equipment or Change in Ownership: 3. Since the last registration form submittal has there been	ions units or ity?
c. Replacement of existing equipment with equipment that is substantially different? d. A change in ownership?	Yes \(\sigma\)No
Jennifer Waltrip 11/19/10	
Inspector's Name (Please Print) Date of Inspection	
November 2011	
U Inspector's Signature Approximate Date of N	ext Inspection
COMMENTS: Department personnel conducted an unannounced annual air compliance inspection. November 19, 2010. Mr. William D. Trahan was available to assist during the inspection.	on at Pensacola Crematory on
Both crematory units were in operation during the inspection. No emissions were observed and no	odors were detected
According to Mr. Trahan, the opacity control system is inspected by facility personnel on a month manufacturer's specifications. The inspection includes cleaning the lenses and aligning the monitor	

Records were well-maintained and available for review for both crematory units. Records included circle charts with temperature recordings for each cremation. The circle charts are marked with the customer tag ID number and date of cremation. Each tag ID number has a separate file which includes the date of cremation, the time when cremation in the primary chamber begins and ends and the name of the operator. There was discussion as to whether it was acceptable to record this information on the files instead of directly on the circle charts. Rule 62-296.401(5)(i), Florida Administrative Code (F.A.C.), states that continuous temperature monitoring documentation shall include operator name, operator indication of when cremation in the primary chamber was begun, date, time, and temperature markings. The rule does not specifically state that the information shall be maintained on the circle charts. The tag ID information on the circle charts was easily matched to the tag ID information on the files and the required documentation was in a permanent legible form available for inspection. This appears to be in compliance with the rule requirements.

According to Mr. Trahan, human remains are occasionally delivered to the facility in body bags with an unknown chlorinated plastic content. Facility personnel have some concern with removing the bodies from the bags they are delivered in to bags with a known chlorinated plastic content, due to possible airborn pathogens. I suggested to Mr. Trahan that he contact the hospitals that deliver the bodies and obtain documentation for their body bags to ensure they are acceptable containers for incineration. This documentation shall be kept on file for the duration of their use and for at least two years after their use.

Please note Rule 62-296.401(5)(d), F.A.C., states that human crematory units shall cremate only human or fetal remains with appropriate containers. The containers shall contain no more than 0.5 percent by weight chlorinated plastics as demonstrated by the manufacturer's data sheet. If containers are incinerated, documentation from the manufacturer certifying that they are composed of 0.5 percent or less by weight chlorinated plastics shall be kept on file at the site for the duration of their use and for at least two years after their use. No other material, including biomedical waste as defined in Rule 62-210.200, F.A.C., shall be incinerated.