



## Florida Department of Environmental Protection

Northwest District  
160 W. Government Street, Suite 308  
Pensacola, Florida 32502-5740

Rick Scott  
Governor

Jennifer Carroll  
Lt. Governor

Herschel T. Vinyard Jr.  
Secretary

July 24, 2012

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

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

Dear Mr. Trahan:

The purpose of this letter is to advise you of concerns noted during a July 16, 2012, compliance assistance visit at your facility, ID 0330278, and to request your help in resolving them. A copy of the visit report is enclosed.

Department of Environmental Protection personnel note the following concerns:

- Facility personnel were unable to present documentation of a visible emissions test conducted during calendar year 2011.

Rule 62-296.401(5)(h)1., Florida Administrative Code (F.A.C.), states that the owner or operator of any human crematory unit using an air general permit shall have a performance test conducted for visible emissions no later than 30 days after the unit commences operation, and annually thereafter. Facility personnel were unable to present documentation of a visible emissions test conducted during calendar year 2011.

- Although visible emissions tests conducted on June 7, 2012 demonstrated compliance, results were greater than results obtained in the past.

Rule 62-296.401(5)(e), F.A.C., provides that all human crematory units shall be maintained in proper working order in accordance with the manufacturer's specifications to ensure the integrity and efficiency of the equipment. If a crematory unit contains a defect that affects the integrity or efficiency of the unit, the unit shall be taken out of service. No person shall use or permit the use of that unit until it has been repaired or adjusted. Repair records on all crematory units shall be maintained onsite for at least two years. A written plan with operating procedures for startup, shutdown

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and malfunction of each crematory unit shall be maintained and followed during those events. Each unit's burners shall be operated with a proper air-to-fuel ratio. If the unit so allows, the burners' flame characteristics shall be visually checked at least once during each operating shift and adjusted when warranted by the visual checks.

- When requested, facility personnel were unable to present documentation from the manufacturer certifying that containers incinerated at their facility are composed of 0.5 percent or less, by weight, chlorinated plastics.

Rule 62-296.401(5)(d), F.A.C., requires human crematory units to cremate only human or fetal remains with appropriate containers. The containers shall contain no more than 0.5% 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.

Please contact Jennifer Waltrip at 850/595-0662 or [jennifer.waltrip@dep.state.fl.us](mailto:jennifer.waltrip@dep.state.fl.us) within 15 days of receipt of this letter to arrange a meeting to discuss these matters and ways to improve efforts for maintaining compliance with the facility's air operation permit.

Sincerely,



Rick Bradburn  
Air Program Administrator

RB/jw/c

Enclosure



# HUMAN CREMATORY



## COMPLIANCE INSPECTION CHECKLIST

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

<b>AIRS ID#:</b> 0330278	<b>DATE:</b> <u>7/16/12</u>	<b>ARRIVE:</b> <u>11:12 AM</u>	<b>DEPART:</b> <u>11:58 AM</u>
<b>FACILITY NAME:</b> PENSACOLA CREMATORY-BEVERLY PKWY			
<b>FACILITY LOCATION:</b> 430 BEVERLY PKWY PENSACOLA 32505			
<b>OWNER/AUTHORIZED REPRESENTATIVE:</b> DENNIS TRAHAN		<b>PHONE:</b> (850)438-6235	
<b>Email:</b>		<b>Mobile:</b>	
<b>CONTACT NAME:</b> DENNIS TRAHAN		<b>PHONE:</b> (850)438-6235	
<b>Email:</b>		<b>Mobile:</b>	
<b>ENTITLEMENT PERIOD:</b> 10/15/2009 / 10/15/2014 (effective date) (end date)			

### Facility Section

**PART I: INSPECTION COMPLIANCE STATUS** (check  only one box)

IN COMPLIANCE     MINOR Non-COMPLIANCE     SIGNIFICANT Non-COMPLIANCE

**PART II: ONSITE INTRODUCTORY MEETING** (check  only one box for each question)

1. Name(s) of facility representative(s): Richard Trahan and Dianna Trahan  
 Brief Notes: \_\_\_\_\_

2. Is the Authorized Representative still DENNIS TRAHAN? -----  Yes    ..No  
 If no, who is?: \_\_\_\_\_  
 If different, did the facility provide an administrative update within 30 days? -----  Yes    ..No

3. Is the facility contact still DENNIS TRAHAN? -----  Yes    ..No  
 If no, who is?: \_\_\_\_\_

4. Will facility be conducting VE test(s) during today's inspection? -----  Yes    ..No  
 If yes, was the compliance authority notified at least 15 days in advance? -----  Yes    ..No

Emissions Unit Section

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

PART I: FILE REVIEW PRIOR TO INSPECTION

(check [X] only one box for each 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 secondary chamber combustion zone to provide for at least a 1.0 second gas residence time at 1800 degrees Fahrenheit?
2. Crematory unit installed after February 1, 2007?
3. Date of last inspection: 11/19/10
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 operation?
d. Date of last VE test: 6/7/12
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)?

PART II: VISIBLE EMISSIONS TESTING

(check [X] only one box for each 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?
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?
2. Was a visible emissions test conducted by the inspector during this site visit?
a. Was the test conducted with the unit operating at a capacity of one (1) adult-sized cadaver?
b. Was the visible emissions test conducted according to EPA Method 9?
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?
3. Is there any reason to ask for a special test to determine compliance with the PM and CO standards?
If yes, what reason?

PART III: MONITORING/RECORDKEEPING REQUIREMENTS

(check [X] only one box for each question)

- 1. Were there any objectionable odors detected?
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)
2. Continuous Monitoring Systems -
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?
b. Is the temperature probe properly placed, at least at the distance where the 1.0 second gas residence time at 1,800 1 1,600 2 degrees was determined?
(Application or initial notification: 1 received on or after 8/30/89; 2 received 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 ..No
  - 3) All CEMS or monitoring device calibration checks (last performed on (1/12/12) ) -----  Yes ..No
  - 4) Adjustments -----  Yes ..No
  - 5) Preventive maintenance performed on systems/devices -----  Yes ..No
  - 6) Corrective maintenance performed on systems/devices -----  Yes ..No
- 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 ..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 automatically control combustion based on continuous in-stack opacity measurement? -----  Yes ..No
  - (2) Is the system calibrated to restrict combustion in the primary chamber whenever any opacity 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 ..No

**PART IV: SECONDARY COMBUSTION ZONE TEMPERATURES**

(check  only one box for each question)

1. If the application to construct was **BEFORE** 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? -----  Yes ..No
  - b. secondary chamber combustion zone temperature equal to or greater than **1400°F** before the cremation process begins in the primary chamber? -----  Yes ..No
2. If the application to construct **ON** or **AFTER** 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? -----  Yes ..No
  - b. secondary chamber combustion zone temperature equal to or greater than **1600°F** before the cremation process begins in the primary chamber? -----  Yes ..No

**PART V: ALLOWED MATERIALS**

(check  only one box for each 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 ..No
- If yes, is the certifying documentation from the manufacturer kept on file for at least 2 years from use?  Yes ..No

**PART VI: EQUIPMENT MAINTENANCE**

(check  only one box for each question)

1. Is the crematory unit maintained in accordance with the manufacturer's specifications? -----  Yes ..No
2. Is there a written plan onsite which addresses the operating procedures during startup, shutdown and malfunction? -----  Yes ..No
3. Does the crematory allow for a visible check on the flame characteristics? -----  Yes ..No  
If no, skip a. – b.
- 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

**PART VII: EU INSPECTION COMPLIANCE STATUS** (check  only one box)

IN COMPLIANCE       MINOR Non-COMPLIANCE       SIGNIFICANT Non-COMPLIANCE

Emissions Unit Section

2 – HumanCrematory-#2prim/2ndarychmbr,temp/opacitymon,LP,150#/hr

PART I: FILE REVIEW PRIOR TO INSPECTION

(check [X] only one box for each 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 secondary chamber combustion zone to provide for at least a 1.0 second gas residence time at 1800 degrees Fahrenheit?
2. Crematory unit installed after February 1, 2007?
3. Date of last inspection: 11/19/10
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 operation?
d. Date of last VE test: 6/7/12
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)?

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(check [X] only one box for each 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?
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d. Did the visible emission test demonstrate compliance with the limit?
3. Is there any reason to ask for a special test to determine compliance with the PM and CO standards?
If yes, what reason?

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(check [X] only one box for each question)

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An upwind/downwind survey of the facility was conducted. The observed parameters were:
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(Application or initial notification: 1 received on or after 8/30/89; 2 received 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 ..No
  - 3) All CEMS or monitoring device calibration checks (last performed on (1/12/12) ) -----  Yes ..No
  - 4) Adjustments -----  Yes ..No
  - 5) Preventive maintenance performed on systems/devices -----  Yes ..No
  - 6) Corrective maintenance performed on systems/devices -----  Yes ..No
- 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 ..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 automatically control combustion based on continuous in-stack opacity measurement? -----  Yes ..No
  - (2) Is the system calibrated to restrict combustion in the primary chamber whenever any opacity 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 ..No

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(check  only one box for each question)

1. If the application to construct was **BEFORE** 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? -----  Yes ..No
  - b. secondary chamber combustion zone temperature equal to or greater than **1400°F** before the cremation process begins in the primary chamber? -----  Yes ..No
2. If the application to construct **ON** or **AFTER** 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? -----  Yes ..No
  - b. secondary chamber combustion zone temperature equal to or greater than **1600°F** before the cremation process begins in the primary chamber? -----  Yes ..No

**PART V: ALLOWED MATERIALS**

(check  only one box for each 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 ..No
- If yes, is the certifying documentation from the manufacturer kept on file for at least 2 years from use?  Yes ..No



**PART VI: EQUIPMENT MAINTENANCE**

(check  only one box for each question)

- 1. Is the crematory unit maintained in accordance with the manufacturer's specifications? -----  Yes ..No
- 2. Is there a written plan onsite which addresses the operating procedures during startup, shutdown and malfunction? -----  Yes ..No
- 3. Does the crematory allow for a visible check on the flame characteristics? -----  Yes ..No  
If no, skip a. – b.
- 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

**PART VII: EU INSPECTION COMPLIANCE STATUS** (check  only one box)

- IN COMPLIANCE
- MINOR Non-COMPLIANCE
- SIGNIFICANT Non-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 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? ----  Yes ..No
- 2. If yes, did the facility provide written notification within 30 days of the change? -----  Yes ..No

New or Modified Process Equipment or Change in Ownership:

- 3. Since the last registration form submittal has there been -----  Yes ..No
  - 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? -----  Yes ..No
  - d. A change in ownership? -----  Yes ..No
- If the any answer to 3a. – d. is Yes , was a new registration form and the appropriate fee submitted 30 days prior to the change? -----  Yes ..No

Jennifer Waltrip

July 16, 2012

Inspector's Name (Please Print)

Date of Inspection

June 2013

Approximate Date of Next Inspection

**COMMENTS:** On July 16, 2012, Department personnel conducted a compliance assistance visit at Pensacola Crematory in Escambia County. The Department would like to thank Mr. Richard Trahan and Ms. Dianne Trahan for their assistance during the inspection.

The crematory units were not in operation at the time of the inspection. All records were well maintained and available for review upon request.

The following concerns were noted during the compliance assistance visit:

It appears that a visible emissions test was not conducted during calendar year 2011 for either emissions unit as required. Rule 62-296.401(5)(h)1., Florida Administrative Code (F.A.C.), states that the owner or operator of any human crematory unit using an air general permit shall have a performance test conducted for visible emissions no later than 30 days after the unit commences operation, and annually thereafter.

A visible emissions test was conducted on June 7, 2012 for calendar year 2012. The test indicated a maximum six-minute opacity of 5% for emissions unit 001 and 5.21% for emissions unit 002. Rule 62-296.401(5)(b)1., F.A.C., states that visible emissions shall not exceed 5% opacity, six-minute average, except that visible emissions not exceeding 15% opacity shall be allowed for up to six minutes in any one-hour period.

The 2012 visible emissions tests were in compliance with the opacity standard, however the emissions may be an indication there is an issue with the cremation units. This was discussed with facility personnel and they plan to speak to the test observer and their maintenance company to address any issues and to prevent any possible violations in the future.

The previous inspection report dated November 29, 2012, noted that Rule 62-296.401(5)(d), F.A.C., required documentation to be kept on file indicating that all bags used in the cremation process were acceptable containers for incineration and contained less than 0.5% by weight chlorinated plastics. When requested, facility personnel were unable to present the required documentation. Facility personnel indicated they spoke with the local medical examiners office following the inspection in 2010 and were assured the bags consisted of non-chlorinated plastic and they no longer incinerate bags from the local hospitals. Following the inspection, I was able to obtain Material Safety Data Sheets (MSDS) from the local medical examiners office, District 1, and confirm that their bags are made of non-chlorinated plastics. The MSDS for their bags have been forwarded to Pensacola Crematory for their files.