

HUMAN CREMATORY



COMPLIANCE INSPECTION CHECKLIST

INSPECTION <u>TYPE</u> :	ANNUAL (INS1, INS2)	COMPLAINT/DISCOVER	Y (CI)
AIRS ID#: 1050398 DA	TE: <u>09/20/2012</u>	ARRIVE: <u>9:19 am</u>	DEPART: <u>12:35pm</u>
FACILITY NAME: LA	KELAND FUNERAL HOME CF	REMATORY	
FACILITY LOCATION	N: 2125 BARTOW RD		
	LAKELAND 33801-65	75	
	carriageservices.com	CK HORVATH PHONE: Mobile: PHONE: Mobile:	(863)686-2125 (863)259-0400 (863)686-2125 (863)669-8383

Facility Section

RT I: INSPECTION COMPLIANCE STATUS (check 🗹 only one box)
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PART II: ONSITE INTRODUCTORY MEETING	(check 🗹 only one
1. Name(s) of facility representative(s): <u>Mr. Ronnie Hicks</u>	box for each question)
Brief Notes: Mr. Hicks is the primary cremation unit operator at the facility.	
 Is the Authorized Representative still CHUCK HORVATH? If no, who is?: <u>Jason Higginbotham</u> 	🗌 Yes 🛛No
If different, did the facility provide an administrative update within 30 days?	
4. Will facility be conducting VE test(s) during today's inspection? If yes, was the compliance authority notified at least 15 days in advance?	

Emissions Unit Section <u>2 – Human Crematory-multi-chmbr,LPfired,200#/hrTemp/opac.mon/rec</u>

PA	ART I: FILE REVIEW PRIOR TO INSPECTION	(check ☑ box for each	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	Xes Yes	□No
	secondary chamber combustion zone to provide for at least a 1.0 second gas residence time at 1800 degrees Fahrenheit? Crematory unit installed after February 1, 2007? Date of last inspection: 12/30/2011	⊠ Yes ⊠ Yes	□No □No
	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? 🖾 N/A d. Date of last VE test: 08/22/2011	Yes	No
	 d. Date of last VE test. 06/22/2011 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)? 		□No □No
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PA	ART II: <u>VISIBLE EMISSIONS TESTING</u>	(check 🗹 box for each	only one question)
1.	Was a visible emissions test conducted by the facility for this unit during this site visit?	Yes	□No □No □No
	c. The visible emission test resulted in an opacity of 0 % for the highest six minute average.d. Did the visible emission test demonstrate compliance with the limit?		No
	 Was a visible emissions test conducted by the inspector during this site visit?	- Yes [-] Yes] Yes	⊠No]No]No
5.	If yes, what reason?	Yes	⊠No
D	ART III: MONITORING/RECORDKEEPING REQUIREMENTS		<u>-</u>
F F	IRT III: <u>MONITORING/RECORDREEPING REQUIREMENTS</u>	(check ☑ box for each	only one 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-0Wind direction -Upwind odor level detected-0Upwind odor level detected-0 (1-		🖾No
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?	🛛 Yes	No
b	Is the temperature probe properly placed, at least at the distance where the 1.0 second gas residence		
l	time at $\prod_{n=1}^{\infty} 1,800^1 \prod_{n=1}^{\infty} 1,600^2$ degrees was determined?		s below
	(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 ()	Yes 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)	Xes	No
	(1) Is the crematory unit equipped and operated with a pollutant monitoring system to automatica	lly	
	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 \square only one box for each question)

1.	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? Yes b. secondary chamber combustion zone temperature equal to or greater than 1400°F before the cremation	No
	process begins in the primary chamber? Yes	No
	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? Xes	No
	b. secondary chamber combustion zone temperature equal to or greater than 1600°F before the cremation process begins in the primary chamber? ————————————————————————————————————	No

PART V: <u>ALLOWED MATERIALS</u>		(check 🗹 box for each	
1.	<i>Other than</i> 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 □No

PART VI: EQUIPMENT MAINTENANCE	(check ☑ box for each	-
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?	Yes	□No □No □No □No

PART VII: <u>EU INSPECTIO</u>	N COMPLIANCE STATUS (check	✓ only one box)
IN COMPLIANCE	MINOR Non-COMPLIANCE	SIGNIFICANT Non-COMPLIANCE

Facility Section (continued)

SPECIAL CONDITIONS AND PROCEDURES	(check 🗹 box for each	only one question)
 <u>Administrative Changes</u>: 1. Were there any changes in the name, address, or phone number of the facility or authorized representati associated with a change in ownership or with a physical relocation of the facility or any emissions unit operations comprising the facility; or any other similar minor administrative change at the facility? 2. If use, did the facility precide written patification within 20 days of the shares? 	s or 🔀 Yes	□No
 If yes, did the facility provide written notification within 30 days of the change? New or Modified Process Equipment or Change in Ownership: Since the last registration form submittal has there been a. Installation of any new process equipment? b. Alterations to existing process equipment without replacement? c. Replacement of existing equipment with equipment that is substantially different? d. A change in ownership? 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 Yes Yes	 ∴No ∴No ∴No ∴No ∴No ∴No ∴No

Wendy D. Akins

Inspector's Name (Please Print)

09/04/2012

Date of Inspection

09/01/2017

Inspector's Signature

Approximate Date of Next Inspection

COMMENTS: Facility scheduled test for Sept. 4, 2012, but consulting firm failed to cancel the testing. Cremation Tort operator, Mr. Ronnie Hicks, stated the VE Testing was supposed to be last Friday, but Mr. Dean Meyers did not show up. I committed to conducting an inspection when the facility reschedules their VE Testing. VE Testing was rescheduled for Sept. 20, 2012. Upon arrival, I was escorted to the area where the cremation unit was located. Cremation unit started warming up at 10:00am. Cremation in the primary chamber began at appoximately 10:20am. According to Mr. Hicks, Mr. Horvath is no longer the Authorized Representative (AR) at this facility, the new AR is Mr. Jason Higginbotham. Mr. Hicks stated the facility let Mr. Horvath go approximately 4 months ago. I spoke with Mr. Higginbotham and explained that he could use the new AGPERS system to update the Department's information and committed to sending a link to the website upon my return to the office. I reviewed Standard Operating Procedures documents and Manufacturers operating instructions which are kept in a binder in Mr. Hicks office. I

reviewed maintenace records and found that on June 16, 2012, Universal Crematory Company (UCC) conducted maintenance on the unit. They checked the refractory on hearth floor, tha gas connections, and gas settings. An annual performance test was conducted by UCC on February 20, 2011. Additional maintenance was conducted on May 20, 2011. UCC adjusted gas to air ratio rate to prevent flame outs. Blower motor is checked annually and was last done by UCC in July 2012. I conducted a spot check of chart records from February 2011 thru September 2012. I was not able to determine if the cremation unit's thermocouple was correctly placed during this inspection because the cremation unit is placed in an area which does not make it possible to check the thermocouple while it is operating. At 3:59 pm on 09/20/2012, I sent a follow-up email providing AGPERS website to Mr. Ronnie Hicks. On 10/09/2012 the SW District received confirmation from AGPERS that the Administrative Correction had been completed. The AGPERS Administrative correction addresses the failure to notify the Department of the change in Authorized Representative. Therefore, this MNC will be resolve with a compliance without enforcment. The facility is now back in compliance with the requirements of their General Permit Entitlement. Photos were not taken during this site visit.