

HUMAN CREMATORY



COMPLIANCE INSPECTION CHECKLIST

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RE-INSPECTION (FUI) ARMS COMPLAINT NO:	
AIRS ID#: 0112702 DATE: 9/17/09 ARRIVE: 0930 DEPART: 1100	
FACILITY NAME: NEPTUNE SOCIETY POMPANO BEACH	
FACILITY LOCATION: 1921 NW 40th Ct	
DEERFIELD BEACH 33064-8719	
OWNER/AUTHORIZED REPRESENTATIVE: JAMES FORD PHONE: (954)556-9400	
CONTACT NAME: same PHONE:	
ENTITLEMENT PERIOD: 3/13/2008 / 3/13/2013 (effective date) (end date)	
PART I: INSPECTION COMPLIANCE STATUS (check ✓ only one box) ☐ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPLIANCE	<u>S</u>
PART II: TESTING/RECORDKEEPING REQUIREMENTS – Rule 62-296.401, F.A.C.	
(check \square appropriate box(es))	
1. Were there any objectionable odor(s) detected?	☐ Yes ⊠ No
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 ☑Yes ☐ No
 Were there any objectionable odor(s) detected?	Yes □ No
 Were there any objectionable odor(s) detected?	Yes □ NoYes □ No
 Were there any objectionable odor(s) detected?	Yes □ No
 Were there any objectionable odor(s) detected?	Yes □ NoYes □ NoYes □ NoYes □ No
 Were there any objectionable odor(s) detected?	Yes □ NoYes □ NoYes □ NoYes □ No
 Were there any objectionable odor(s) detected?	 Yes □ No
 Were there any objectionable odor(s) detected?	 Yes □ No
 Were there any objectionable odor(s) detected?	

PART III: OPERATING/RECORDKEEPING REQUIREMENTS – Rule 62-296.401, F.A.C. (check ☑ appropriate box(es))	
1. Is there Continuous Emissions Monitoring System (CEMS) equipment installed on each unit to record	temperatures in the
primary and secondary chambers where there is a 1.0 second gas residence time in the secondary chamber co	ombustion zone in
accordance with the manufacturer's instructions?	
a) Do temperature probes seem to be properly placed?	
b) Are the following records kept on file, available for inspection for at least two years following the re-	
measurements, maintenance, reports and records?	cording or such
1) All measurements (including CEMS)	⊠Yes □ No
2) Monitoring device	⊠Yes ☐ No
3) Performance Testing Measurements	
4) CEMS Performance Evaluation	
5) All CEMS or monitoring device calibration checks	
	⊠Yes ☐ No
7) Preventive maintenance performed on systems/devices	
8) Corrective maintenance performed on systems/devices	⊠Yes ☐ No
2. Was this crematory unit constructed: (check only one ☑ box)	M 1 es □ No
a) BEFORE August 30, 1989? (If this box checked, continue on to #3 and skip #4)	
b) ON or AFTER August 30, 1989? (If this box checked, skip #3 and continue on to #4)	
3. If constructed BEFORE 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?	☐Yes ☐ No
c) cremation in the primary chamber begun after the secondary chamber combustion zone temperature	
is equal to or greater than 1400°F ?	☐Yes ☐ No
d) required monitoring equipment installed and operational, and providing continuous monitoring to	
record the temperature at the point or beyond where 1.0 second gas residence time is obtained in the	
secondary chamber combustion zone according to the manufacturer's instructions?	□Yes □ No
4. If constructed ON on AFTED Avguet 20, 1000 is the	
 4. If constructed ON or AFTER August 30, 1989 is the: a) volume in the secondary combustion zone sufficient to provide at least a 1.0 second gas residence tin 	20
(a) Volume in the secondary combustion zone sufficient to provide at least a 1.0 second gas residence this	⊠Yes □ No
	M i es □ 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?	⊠vas □ Na
	⊠Yes □ No
c) secondary chamber combustion zone temperature equal to or greater than 1600°F before the crematic	
process begins in the primary chamber?	⊠Yes ☐ No
5. Are appropriate cremation containers containing no more than 0.5 % (percent) by weight chlorinated	Mx. Dx.
plastics used during the cremation of dead human bodies?	⊠Yes □ No
a) If the answer to question 4 above is YES, is certifying documentation from the manufacturer that the	y
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?	⊠Yes ☐ No
b) Are there any other materials, including biomedical wastes (Rule 62-210.200, FAC) incinerated at	
this location?	∐Yes ⊠ No
6. Have all crematory operators been trained and certified by a Department-approved training program?	⊠Yes □ No
a) Are copies of the training certificates for all crematory operators kept on file at the facility for the du	
of the operator's employment & for an additional two years after termination of employment?	⊠Yes ☐ No

PART IV: SPECIAL CONDITIONS AND PROCEDURI A. New or Modified Process Equipment	ES – Rule 62-296.401, F.A.C.	
 Since the last inspection has there been a) installation of any new process equipment? b) alterations to existing process equipment withor c) replacement of existing equipment substantially recent notification form? d) If you answered YES to any of the above, did to notification form and appropriate fee (Rule 62-local program office?	out replacement?	
Art Pennetta	9/17/09	
Inspector's Name (Please Print)	Date of Inspection	
	9/2010	
Inspector's Signature	Approximate Date of Next Inspection	
COMMENTS: VE testing conducted by Bill Arlington.		