

HUMAN CREMATORY



COMPLIANCE INSPECTION CHECKLIST

INSPECTION TYPE: ANNUAL (INS1, INS2) ☐ COMPLAINT/DISCOVERY (CI) ☐	
RE-INSPECTION (FUI) ARMS COMPLAINT NO:	
AIRS ID#: 1270051 DATE: 12/15/09 ARRIVE: 11:57am DEPART: 12:45am	<u>1</u>
FACILITY NAME: BALDAUFF FAMILY FUNERAL HOME	
FACILITY LOCATION: 1233 SAXON BLVD	
ORANGE CITY 32763-8464	
OWNER/AUTHORIZED REPRESENTATIVE: BOB THOMPSON PHONE: (386)775-2101	
CONTACT NAME: BENJAMIN NIEVES PHONE:	
ENTITLEMENT PERIOD: 4/19/2009 / 4/19/2014 (effective date) (end date)	
PART I: INSPECTION COMPLIANCE STATUS (check ☑ only one box)	
☐ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPLIANCE	
PART II: TESTING/RECORDKEEPING REQUIREMENTS - Rule 62-296 401 F A C	
PART II: TESTING/RECORDKEEPING REQUIREMENTS – Rule 62-296.401, F.A.C. (check ☑ appropriate box(es))	
(check ☑ appropriate box(es)) 1. Were there any objectionable odor(s) detected?	☐ Yes ⊠ No
(check ☑ appropriate box(es)) 1. Were there any objectionable odor(s) detected?	□ Yes ⊠ No
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(check ☑ appropriate box(es)) 1. Were there any objectionable odor(s) detected?	Yes ⊠ No
 (check ☑ appropriate box(es)) Were there any objectionable odor(s) detected?	Yes ⊠ No Yes □ No Yes □No
(check ☑ appropriate box(es)) 1. Were there any objectionable odor(s) detected?	Yes ⊠ No
(check ☑ appropriate box(es)) 1. Were there any objectionable odor(s) detected?————————————————————————————————————	Yes No Yes No Yes No Yes No Yes No
 (check ☑ appropriate box(es)) Were there any objectionable odor(s) detected?	Yes No Yes No Yes No Yes No Yes No
1. Were there any objectionable odor(s) detected?	Yes No Yes No
(check ☑ appropriate box(es)) 1. Were there any objectionable odor(s) detected?	Yes No Yes No Yes No Yes No Yes No Yes No

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	
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	cording of such
measurements, maintenance, reports and records?	
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	
6) Adjustments	∐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)	
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	△10 △10
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
secondary chamber combustion zone according to the manufacturer's instructions:	
4. If constructed <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 tire	
@ 1800° F?	☐Yes ☐ 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?	☐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	
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	
are composed of 0.5% or less by weight chlorinated plastics kept on file at the site for the duration o	f
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
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PART IV: SPECIAL CONDITIONS AND PROCEDURES	<u>S</u> – Rule 62-296.401, F.A.C.		
A. New or Modified Process Equipment			
 Since the last inspection has there been a) installation of any new process equipment? 	□Yes ⊠No		
b) alterations to existing process equipment withou			
c) replacement of existing equipment substantially recent notification form?	different than that noted on the most		
 d) If you answered <u>YES</u> to any of the above, did the notification form and appropriate fee (Rule 62-4) 	e owner submit a new and complete .050, F.A.C.) to the appropriate DEP or		
local program office?			
was required, have all operators been retrained to operate the modified unit? Yes No			
3. In the case of new or modified equipment, where a D required, has the owner submitted copies of all opera a) submitted within the 15 day required window follows:	tor training certificates? Yes No		
Danielle D. Owens	12/15/09		
Inspector's Name (Please Print)	Date of Inspection		
Inspector's Signature	Approximate Date of Next Inspection		
	and Mc Wanda Parker Corvin of EDEP visited the subject facility to		

COMMENTS: On December 15, 2009, Ms. Danielle Owens and Ms. Wanda Parker-Garvin of FDEP visited the subject facility to conduct a level 2 compliance inspection. Contact was made with Mr. Bob Thompson, General Manager and Mr. Benjamin Nieves, Crematory Operator.

- 1. An inspection of the crematory unit (IE Power Pak, serial #014338, model #IE43-PP) was conducted. The location of the thermocouple was identified and documented as being located approximately 56 inches from the front of the unit on the right side (when facing the front of the unit).
- 2. The temperature readings from the program logic controller (PLC), analog temperature chart, and the Department's digital thermometer appeared to be in agreement with each other. The following temperature readings were documented: Program Logic Controller = 1435 degrees F; Analog Temperature Chart = 1500degrees F; Digital Thermometer = 1422 degrees F.
- 3. The opacity reader and the stack for this unit was observed. No visible emissions were observed; a Method 9 evaluation was not necessary. No objectionable odors were detected.
- 4. Temperature charts, maintanence records, and MSDS sheets were reviewed. The temperature charts indicated cremations were consistently conducted at temperatures above 1700 degrees F. Maintenance records indicated maintenance is done quarterly by Mathews with the last maintenance inspection occurring on October 5, 2009. The maintenance report indicated the unit is in good condition and needed only minor repairs. MSDS sheets indicated no chlorinated plastics are contained in the body bags.
- 5. Questions 4 and 6 in Part II, questions 1b, and 4 in Part III, and questions 1c, 1d, 2, and 3 in Part IV are not applicable.