

HUMAN CREMATORY



COMPLIANCE INSPECTION CHECKLIST

INSPECTION TYPE :	ANNUAL (INS1, INS2)	COMPLAINT/DISCOVE	ERY (CI)
	RE-INSPECTION (FUI)	ARMS COMPLAINT NO):
AIRS ID#: 0251307 DA	TE: <u>2/23/2010</u>	ARRIVE: <u>10:55 AM</u>	DEPART: <u>11:25 AM</u>
FACILITY NAME: MA	ASPONS FUNERAL HOME-M	TAMI	
FACILITY LOCATION	N: 3500 SW 8TH ST		
	MIAMI 33135-4110		
OWNER/AUTHORIZE	D REPRESENTATIVE: ERI	IC MASPONS PHON	E: (305)461-5070
CONTACT NAME:		PHONI	E:
ENTITLEMENT PERIO	OD: 3/14/2009 / 3/14/2014 (effective date) (end date)	4	
☐ IN COMPLIAN	CE MINOR Non-COM	PLIANCE SIGNIFICA	NT Non-COMPLIANCE
PART II: TESTING/RE	CORDKEEPING REQUIRE	MENTS – Rule 62-296.401. F.	A.C.
(check ☑ appropriate		<u> </u>	
	ojectionable odor(s) detected? ssions test conducted during this		
62-297, F.A.C.)?-			
days prior to the A	strate individual source complia AGP Notification form submission	on, and within 60 days prior to	each anniversary date?
4. In order to demon	(5)(i), F.A.C.)strate individual source complia	nce were the remaining applica	ble standards testing
	a 60 days prior to the AGP Notificial (CO) emissions equal to or		
	, corrected to 7% O_2 on an hour 62-297, F.A.C.)?		
	erformed according to EPA Metl tter emissions test with results ea		
dry standard cubic	c foot (ft ³)of flue gas, corrected to 297, F.A.C.)?	to 7% O ₂ and tested according t	to EPA Method 5
5. Was all emissions	testing conducted with the sour		
6. Was CO & PM co	ompliance demonstrated by subn	nission of a test report for an ide	entical crematory unit? Tyes No
	ani nomina alivasi 1.2 uavs DHO!		ompliance test? Ves No
	test report filed with the Departr	r to the date of the last formal coment as soon as practical, but no	o longer than 45 days after

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 to primary and secondary chambers where there is a 1.0 second gas residence time in the secondary chamber cor accordance with the manufacturer's instructions?	nbustion zone in
	∑Yes ☐ No
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 reco	ording of such
measurements, maintenance, reports and records?	
	⊠Yes ☐ No
2) Monitoring device	⊠Yes □ No
3) Performance Testing Measurements	☐Yes ☐ No
4) CEMS Performance Evaluation	☐Yes ☐ No
5) All CEMS or monitoring device calibration checks	Yes No
6) Adjustments	Yes No
7) Preventive maintenance performed on systems/devices	Yes No
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	
	□Vas □ No
c) cremation in the primary chamber begun after the secondary chamber combustion zone temperature	∐Yes ☐ No
	□V □ N-
1 0	☐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 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 time	1
	∑Yes ☐ No
b) the actual operating temperature of the secondary chamber combustion zone no less than 1600°F	
	⊠Yes □ No
c) secondary chamber combustion zone temperature equal to or greater than 1600°F before the cremation	
process begins in the primary chamber?	⊠Yes ☐ No
5. Are appropriate cremation containers containing no more than 0.5 % (percent) by weight chlorinated	
	⊠Yes ☐ No
a) If the answer to question 4 above is YES, is certifying documentation from the manufacturer that they	
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 dura	
	⊠Yes □ No

 Since the last inspection has there been installation of any new process equipment? alterations to existing process equipment with replacement of existing equipment substantial recent notification form? If you answered <u>YES</u> to any of the above, die 	nout replacement?
notification form and appropriate fee (Rule 6) local program office?	2-4.050, F.A.C.) to the appropriate DEP or
was required, have all operators been retrained to 3. In the case of new or modified equipment, where a required, has the owner submitted copies of all op a) submitted within the 15 day required window	a Department air construction permit was erator training certificates? Yes No
3. In the case of new or modified equipment, where a required, has the owner submitted copies of all op	a Department air construction permit was erator training certificates? Yes No
3. In the case of new or modified equipment, where a required, has the owner submitted copies of all op a) submitted within the 15 day required window	a Department air construction permit was berator training certificates? Yes No following the training? Yes No

THE HOUSEKEEPING IS GOOD.