

HUMAN CREMATORY



COMPLIANCE INSPECTION CHECKLIST

IN:	SPECTION TYPE:	ANNUAL (INS1, INS2) RE-INSPECTION (FUI)	_	AINT/DISCOVER	Y (CI)		
ΑI	RS ID#: 0150101 DA	TE: <u>12/19/2012</u>	ARRIVE:	10:30 a.m.	DEPART: 10:45	<u>a.m.</u>	
FA	CILITY NAME: CH	ARLOTTE MEMORIAL					
FA	CILITY LOCATION	: 9400 INDIAN SPR	RINGS CEMETER	Y RD			
		PUNTA GORDA	33950				
CC	VNER/AUTHORIZE Email: mfuller59@ac ONTACT NAME: M Email: mfuller59@ac ITITLEMENT PERIC	IICHAEL FULLER* ol.com	15/2017	Mobile:	(941)639-1171 (239)571-5451 (941)639-1171 (239)571-5451		
Facility Section PART I: INSPECTION COMPLIANCE STATUS (check ☑ only one box) ☑ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPLIANCE							
PA	RT II: <u>ONSITE INTI</u>	RODUCTORY MEETING	<u>G</u>		(chec	ck 🗹	only one
1.	Name(s) of facility rep	presentative(s):			,		question)
	Brief Notes:						
	Is the Authorized Repr If no, who is?:	resentative still MICHAEL -	FULLER*?		Y	'es	□No
3.		ility provide an administrat till MICHAEL FULLER*?				es es	□No □No
		eting VE test(s) during toda ance authority notified at le				Yes Yes	□No □No

Emissions Unit Section 1 – HumanCrematory - prim/2ndarychmbrs,NG,Temp,opacM,175lb/hr

PA	RT I: FILE REVIEW PRIOR TO INSPECTION	(check ☑ 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 	⊠ Yes	□No
3.	secondary chamber combustion zone to provide for at least a 1.0 second gas residence time at 1800 degrees Fahrenheit?	∑ Yes∑ Yes	□No □No
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	☐ Yes ☐ Yes	□No □No
	operation? N/A d. Date of last VE test: e. Was the VE test report filed with the compliance authority no later than 45 days after the test?	☐ Yes	□No
	f. Did the facility demonstrate compliance during the last VE test? If no, what was the problem (if known)?	Yes	□No
PA	RT II: <u>VISIBLE EMISSIONS TESTING</u>	(check ☑ box for each of	only one 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?	Yes	□No □No □No
	 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?		□No
	Was a visible emissions test conducted by the inspector during this site visit?	Yes Yes	No No No
3.	Is there any reason to ask for a special test to determine compliance with the PM and CO standard If yes, what reason?	rds?	□No
PA	RT III: MONITORING/RECORDKEEPING REQUIREMENTS	(check 🗹 box for each o	only one question)
1.	Were there any objectionable odors detected?	☐ Yes	□No
	An upwind/downwind survey of the facility was conducted. The observed parameters were: Downwind odor level detected- Wind direction - Upwind odor level detected-		
	Continuous Monitoring Systems — 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 time at $\prod 1,800^1 \prod 1,600^2$ degrees was determined?	Yes	□No

PART III: MONITORING/RECORDKEEPING REQUIREMENTS (continued)							
TART III. MONITORING/RECORDREET ING REQUIREMENTS (COntinued)							
c. Are the following records kept on file, available for inspection, for at least the past two years?							
 All temperature measurements	∐ Yes	∐No					
monitoring system all continuous performance evaluations 3) All CEMS or monitoring device calibration checks (last performed on ()	☐ Yes ☐ Yes	∐No □No					
4) Adjustments5) Preventive maintenance performed on systems/devices	☐ Yes☐ Yes	∐No □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)(1) Is the crematory unit equipped and operated with a pollutant monitoring system to automatical		□No					
control combustion based on continuous in-stack opacity measurement?(2) Is the system calibrated to restrict combustion in the primary chamber whenever any opacity	☐ Yes	∐No					
exceeds 15% opacity?(3) Has the opacity measurement system been cleaned and checked for proper operation in	☐ Yes	□No					
accordance with the manufacturer's recommended maintenance schedule?	Yes	□No					
DADT IV. CECONDADY COMPLICTION ZONE TEMPEDATURES	(check 🗹	only one					
PART IV: <u>SECONDARY COMBUSTION ZONE TEMPERATURES</u>	box for each						
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?	box for each Yes						
 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 	box for each Yes	question)					
 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?	box for each Yes on	question)					
 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? ————————————————————————————————————	box for each ☐ Yes on ☐ Yes ☐ Yes	question)					
 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?	box for each ☐ Yes on ☐ Yes ☐ Yes	question)					
 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 on □ Yes on □ Yes	question)					
 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?	box for each Yes Yes Yes Yes Yes Yes	question) NoNoNoNo only one					
 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? b. secondary chamber combustion zone temperature equal to or greater than 1400°F before the cremati process begins in the primary chamber? 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? b. secondary chamber combustion zone temperature equal to or greater than 1600°F before the cremati process begins in the primary chamber? 	box for each ☐ Yes on ☐ Yes ☐ Yes ☐ Yes on ☐ Yes (check ☑	question) No No No No only one					

PART VI: EQUIPMENT MAINTENANCE			(check ☑ only one box for each question)			
1. Is the crematory unit maintained in accordance with the manufacture of the contract of the crematory unit maintained in accordance with the manufacture.	cturer's specifications?	☐ Yes	□No			
 2. Is there a written plan onsite which addresses the operating proc shutdown and malfunction? 3. Does the crematory allow for a visible check on the flame character of the plane of the plane. a. Was the flame characteristic visually checked at least once do 	cteristics?		□No □No □No			
b. Was the flame adjusted when necessary?		□No				
PART VII: EU INSPECTION COMPLIANCE STATUS (chec	ck ☑ only one box)					
☐ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE	SIGNIFICANT Non-COMPL	IANCE				
Facility Section (continued)						
SPECIAL CONDITIONS AND PROCEDURES		(check ☑ box for eac	•			
 Administrative Changes: Were there any changes in the name, address, or phone number associated with a change in ownership or with a physical relocat operations comprising the facility; or any other similar minor ad If yes, did the facility provide written notification within 30 days. 	ion of the facility or any emissions uni ministrative change at the facility?	ts or Yes	⊠No □No			
New or Modified Process Equipment or Change in Ownership: 3. Since the last registration form submittal has there been			□No □No □No □No □No □No			
ROBERT J. STEWART	12/19/2012					
Inspector's Name (Please Print)	Date of Inspection					
Robert J. Stewart	03/2013					
Inspector's Signature Approximate Date of Next Inspection						

COMMENTS: THE FACILITY HAS A MATTHEWS POWER PAK II CREMATORY UNIT NOW INSTALLED ON SITE. THE UNIT HAS NOT YET BEEN CALIBRATED BY MATTHEWS AND THE EMPLOYEES HAVE NOT YET BEEN TRAINED TO OPERATE THE UNIT.