

#### ANIMAL CREMATORY



#### COMPLIANCE INSPECTION CHECKLIST

INSPEC		ANNUAL (INS1, INS2) RE-INSPECTION (FUI)	COMPLAINT/E  ARMS COMPL	DISCOVERY (CI)		
AIRS II	<b>D#:</b> 0010001 <b>DA</b> 7	ГЕ:	ARRIVE:	DEPAR	T:	
FACIL	ITY NAME: FL	POWER TEST SITE NAMI	Е			
FACIL	ITY LOCATION	200 S Magnolia Dr				
		TALLAHASSEE :	30043			
Ema CONTA Ema	il: A <b>CT NAME:</b> D <i>i</i> il:			PHONE: (352)337-0 Mobile: PHONE: (727)820-3 Mobile:	5295	
ENTIT	LEMENT PERIO	<b>DD:</b> 2/11/2012 / 3/23/2 (effective date) (end dat	2012 Facility may be on the control of the control	perating without Entit	lement!	
PART I	: INSPECTION IN COMPLIANC	COMPLIANCE STATUS  CE MINOR Non-CO		x) GNIFICANT Non-COM	PLIANCE	
PART I	II. ONSITE INTR	RODUCTORY MEETING			(1 1 <b>1</b> 1	
		resentative(s):	<u>.</u>		(check <b>d</b> onl box for each ques	•
Brie	f Notes:					
	e Authorized Repres, who is?:	esentative still WILSON HI	CKS?		Yes	]No
3. Is the		ility provide an administratii till DAVE 8HI9UHY8?				]No ]No
		ting VE test(s) during today nce authority notified at leas				]No ]No

## Emissions Unit Section 1 –GE LM6000-PA Combustion Turbine

PART I: FILE REVIEW PRIOR TO INSPECTION	(check 🗹	only one
	box for each	•
1. a. Complete AC application or, if no AC permit, initial GP registration received on or after August 30, 1989?	☐ Yes	□No
b. If yes, were design calculations provided then to confirm a sufficient volume in the		
secondary chamber combustion zone to provide for at least a 1.0 second gas residence time at 1800 degrees Fahrenheit?	☐ Yes	⊠No
2. Manufacturer's recommended capacity:	_	
<ul><li>3. Crematory unit installed after February 1, 2007?</li><li>4. Date of last inspection:</li></ul>	∐ Yes	⊠No
5. 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?		⊠No ⊠No
c. If first year of operation, was a VE test performed within 30 days of commencing		
operation? $\square$ N/A d. Date of last VE test:	☐ Yes	⊠No
e. Was the VE test report filed with the compliance authority no later than 45 days after the test?		⊠No
f. Did the facility demonstrate compliance during the last VE test?	☐ Yes	⊠No
PART II: <u>VISIBLE EMISSIONS TESTING</u>	(check 🗹	only one
	box for each	question)
<b>1.</b> Was a visible emissions test conducted by the facility for this unit during this site visit?a. Operating capacity during test?	Yes Yes	□No
b. Was the operating capacity greater than the manufacturer's recommended capacity?	☐ Yes	□No
c. Was the test conducted with the unit operating at a capacity that is representative of normal operations? d. Was the visible emissions test conducted according to EPA Method 9?	Yes Yes	□No
e. The visible emission test resulted in an opacity of % for the highest six minute average.	1 es	□No
f. Did the visible emission test demonstrate compliance with the limit?	Yes	□No
(5% opacity, six-minute average, except that visible emissions not exceeding 15% opacity shall be allowed for up to six minutes	in any one-nour)	
2. Was a visible emissions test conducted by the inspector during this site visit?	Yes Yes	□No
a. Operating capacity during test?	☐ Yes	□No
c. Was the test conducted with the unit operating at a capacity that is representative of normal operations?		□No
d. Was the visible emissions test conducted according to EPA Method 9?e. The visible emission test resulted in an opacity of % for the highest six minute average.	☐ Yes	□No
f. Did the visible emission test demonstrate compliance with the limit?	Yes Yes	□No
(5% opacity, six-minute average, except that visible emissions not exceeding 15% opacity shall be allowed for up to six minutes	in any one-hour)	
3. Is there any reason to ask for a special test to determine compliance with the PM and CO standard	_	□ N1.
If yes, what reason?	∐ Yes	∐No

PART III: MONITORING/RECORDKEEPING REQUIREMENTS	(check <b>☑</b> only one
	box for each question)
1. Were there any objectionable odors detected?	YesNo
An upwind/downwind survey of the facility was conducted. The observed parameters were:  Wind direction Downwind odor level detected Upwind odor level detected	Scale: 1-10 (worst)
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?	YesNo
b Is the temperature probe properly placed, at least at the distance where the 1.0 second gas resider time at $\Box$ 1,800 <sup>1</sup> $\Box$ 1,600 <sup>2</sup> degrees was determined?	
c. Are the following records kept on file, available for inspection, for at least the past two years?  (1) All temperature measurements	
(2) All continuous monitoring systems, monitoring devices, and performance testing measurement monitoring system all continuous performance evaluations	YesNo
(4) Adjustments	YesNo
(5) Preventive maintenance performed on systems/devices	YesNo
(6) Corrective maintenance performed on systems/devices	YesNo
<ul> <li>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</li> <li>e. Was the crematory unit installed after 2/1/07? If no, skip e.(1) – (3)</li></ul>	
(1) Is the crematory unit equipped and operated with a pollutant monitoring system to autocontrol combustion based on continuous in-stack opacity measurement?	YesNo
(2) Is the system calibrated to restrict combustion in the primary chamber whenever any operation in the primary c	YesNo
accordance with the manufacturer's recommended maintenance schedule?	
	(check <b>☑</b> only one
PART IV: SECONDARY COMBUSTION ZONE TEMPERATURES	box for each question)
<ol> <li>If the application to construct was <u>BEFORE</u> August 30, 1989 is the:</li> <li>a. actual operating temperature of the secondary chamber combustion zone no less than 1400°F</li> </ol>	
throughout the combustion process in the primary chamber?	
b. secondary chamber combustion zone temperature equal to or greater than <b>1400°F</b> before the comprocess begins in the primary chamber?	
<ul> <li>If the application to construct ON or AFTER August 30, 1989 is the:</li> <li>a. the actual operating temperature of the secondary chamber combustion zone no less than 1600 throughout the combustion process in the primary chamber?</li> <li>b. secondary chamber combustion zone temperature equal to or greater than 1600°F before the combustion.</li> </ul>	YesNo
process begins in the primary chamber?	
	(check <b>✓</b> only one
PART V: <u>ALLOWED MATERIALS</u>	box for each question)
Besides animal remains and, if applicable, the bedding associated with the animals and appropria are any other materials, including biomedical wastes, incinerated in the unit?  If yes, what other materials?	
Do containers contain no more than 0.5 percent by weight chlorinated plastics as certified by the manufacturer?	

PART VI: <u>EQUIPMENT MAINTENANCE</u>	(check <b>✓</b> box for each	•
<ol> <li>Is the crematory unit maintained in accordance with the manufacturer's specifications?</li></ol>		No  No  No  No  No
PART VII: EU INSPECTION COMPLIANCE STATUS (check ✓ only one box)  ☐ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMP	LIANCE	

#### **Emissions Unit Section** 3 –NO.5 STEAM BOILER

PART I: FILE REVIEW PRIOR TO INSPECTION	(check <b>☑</b> box for each	only one question)
<ol> <li>a. Complete AC application or, if no AC permit, initial GP registration received on or after August 30, 1989?</li> <li>b. If yes, were design calculations provided then to confirm a sufficient volume in the</li> </ol>	Yes	□No
secondary chamber combustion zone to provide for at least a 1.0 second gas residence time at 1800 degrees Fahrenheit?	☐ Yes	□No
2. Manufacturer's recommended capacity:	Yes	□No
5. 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 operation?	☐ Yes	No  No  No
f. Did the facility demonstrate compliance during the last VE test?  If no, what was the problem (if known)?		∐No □No
PART II: <u>VISIBLE EMISSIONS TESTING</u>	(check <b>☑</b> box for each	only one question)
1. Was a visible emissions test conducted by the facility for this unit during this site visit?	Yes Yes Yes	No  No  No  No
(5% opacity, six-minute average, except that visible emissions not exceeding 15% opacity shall be allowed for up to six minute		
2. Was a visible emissions test conducted by the inspector during this site visit?	Yes Yes Yes Yes Yes S in any one-hour)	No  No  No  No  No
3. Is there any reason to ask for a special test to determine compliance with the PM and CO standa  If yes, what reason?	Yes Yes	□No

PA	ART III: MONITORING/RECORDKEEPING REQUIREMENTS	(check	
		box for each	h question)
1.	Were there any objectionable odors detected?	☐ Yes	□No
	An upwind/downwind survey of the facility was conducted. The observed parameters were:  Wind direction Downwind odor level detected Upwind odor level detected	Scale: 1-10	(worst)
2.			
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	time at $\Box$ 1,800 <sup>1</sup> $\Box$ 1,600 <sup>2</sup> degrees was determined?	Yes	□No
c.	(1) All temperature measurements	☐ Yes	□No
	(2) All continuous monitoring systems, monitoring devices, and performance testing measurements; monitoring system all continuous performance evaluations		□No
	(3) All CEMS or monitoring device calibration checks (last performed on)	☐ Yes ☐ Yes	□No □No
	(5) Preventive maintenance performed on systems/devices	Yes Yes	☐No
	(6) Corrective maintenance performed on systems/devices	☐ Yes	□No
	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 ☐ Yes	□No □No
	<ul><li>(1) Is the crematory unit equipped and operated with a pollutant monitoring system to automatical control combustion based on continuous in-stack opacity measurement?</li></ul>		□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
		(check 🗹	only one
PA	ART IV: SECONDARY COMBUSTION ZONE TEMPERATURES	box for eac	h 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?b. secondary chamber combustion zone temperature equal to or greater than <b>1400</b> °F before the cremat		□No
	process begins in the primary chamber?	Yes	□No
2.	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 cremat	Yes	□No
	process begins in the primary chamber?	Yes	□No
		(check ✓	only one
n.		`	· =
	ART V: <u>ALLOWED MATERIALS</u>	box for eac	ii question)
	Besides animal remains and, if applicable, the bedding associated with the animals and appropriate con are any other materials, including biomedical wastes, incinerated in the unit?	ntainers,	No
1.	Besides animal remains and, if applicable, the bedding associated with the animals and appropriate con are any other materials, including biomedical wastes, incinerated in the unit?	itainers,  Yes  Yes	_

PART VI: <u>EQUIPMENT MAINTENANCE</u>	(check <b>✓</b> box for each	•
<ol> <li>Is the crematory unit maintained in accordance with the manufacturer's specifications?</li></ol>		No  No  No  No  No
PART VII: EU INSPECTION COMPLIANCE STATUS (check ✓ only one box)  ☐ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMP	LIANCE	

## Emissions Unit Section 5 – DUCT BURNER SYSTEM ASSOCIATED WITH HRSG

PART 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 secondary chamber combustion zone to provide for at least a 1.0 second gas residence time at 1800 degrees Fahrenheit?	YesNo
<ol> <li>Manufacturer's recommended capacity:</li></ol>	it. YesNo
5. 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 operation?	YesNo
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?  f. Did the facility demonstrate compliance during the last VE test?	YesNo
PART II: <u>VISIBLE EMISSIONS TESTING</u>	(check ☑ only one box for each question)
1. Was a visible emissions test conducted by the facility for this unit during this site visit?	YesNo ns? YesNo YesNo YesNo YesNo YesNo YesNo YesNo YesNo YesNo
b. Was the operating capacity greater than the manufacturer's recommended capacity?	ns?
3. Is there any reason to ask for a special test to determine compliance with the PM and CO stan  If yes, what reason?	dards?  YesNo

P	ART III: MONITORING/RECORDKEEPING REQUIREMENTS	(check 🗹	only one
		box for each	question)
1.	Were there any objectionable odors detected?	☐ Yes	□No
	An upwind/downwind survey of the facility was conducted. The observed parameters were:	Cooler 1 10	(vvomat)
	Wind direction Downwind odor level detected Upwind odor level detected	Scale: 1-10	(worst)
2.			
a	Is a continuous temperature monitoring system installed on each unit to record temperatures in the	□ v	□ Na
b	secondary chamber in accordance with the manufacturer's instructions?	☐ Yes	□No
	time at $\Box$ 1,800 <sup>1</sup> $\Box$ 1,600 <sup>2</sup> degrees was determined?	☐ Yes	□No
	(Application or initial notification: <sup>1</sup> received on or after 8/30/89; <sup>2</sup> received before 8/30/89)		
c.	Are the following records kept on file, available for inspection, for at least the past two years?		
	(1) All temperature measurements	Yes Yes	□No
	(2) All continuous monitoring systems, monitoring devices, and performance testing measurements;	□ x <sub>7</sub>	
	monitoring system all continuous performance evaluations		∐No ∏No
	(4) Adjustments(4) (5) An CEWIS of mointoring device cambration checks (fast performed on)	Yes	□No
	(5) Preventive maintenance performed on systems/devices	Yes	□No
	(6) Corrective maintenance performed on systems/devices	☐ Yes	□No
А	Are the temperature charts properly documented with operator name, operator indication of		
u.	when cremation in the primary chamber was begun, date, time, and temperature markings	Yes	□No
e.	Was the crematory unit installed <b>after <math>2/1/07</math>?</b> If no, skip e.(1) – (3)	Yes	□No
	(1) Is the crematory unit equipped and operated with a pollutant monitoring system to automatic		
	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	les	NO
	accordance with the manufacturer's recommended maintenance schedule?	Yes	□No
_		(check 🗹	only one
<u> </u>	A DE IV. CECONDA DV. COMBUCTION (LONE TEMBER A TUBEC	box for each	_
P	ART IV: SECONDARY COMBUSTION ZONE TEMPERATURES	00/1101 0401	question)
1.	If the application to construct was <b>BEFORE</b> 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 cremat		□No
	process begins in the primary chamber?	Yes	□No
2.	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 <b>1600°F</b>		
	throughout the combustion process in the primary chamber?	Yes	□No
	b. secondary chamber combustion zone temperature equal to or greater than 1600°F before the cremat	_	
	process begins in the primary chamber?	Yes	□No
		(check <b>☑</b>	only one
P	ART V: ALLOWED MATERIALS	box for each	· -
- 1	· · · <u> · · · · · · · · · · · </u>		· ′
		_	
1.	Besides animal remains and, if applicable, the bedding associated with the animals and appropriate cor		
	are any other materials, including biomedical wastes, incinerated in the unit?	☐ Yes	□No
	If yes, what other materials?		
۱,			
<i>Z</i> .	Do containers contain no more than 0.5 percent by weight chlorinated plastics		
Ζ.	Do containers contain no more than 0.5 percent by weight chlorinated plastics as certified by the manufacturer?	Yes Yes	□No

PART VI: <u>EQUIPMENT MAINTENANCE</u>	(check <b>✓</b> box for each	•
<ol> <li>Is the crematory unit maintained in accordance with the manufacturer's specifications?</li></ol>		No  No  No  No  No
PART VII: EU INSPECTION COMPLIANCE STATUS (check ✓ only one box)  ☐ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMP	LIANCE	

# Emissions Unit Section 7 –NEW LM6000PC-ESPRINT COMBUSTION TURBINE

PART I: FILE REVIEW PRIOR TO INSPECTION	(check 🗹	only one
1. a. Complete AC application or, if no AC permit, initial GP registration received on or after August 30, 1989?	box for each Yes	question)
b. If yes, were design calculations provided then to confirm a sufficient volume in the secondary chamber combustion zone to provide for at least a 1.0 second gas residence time at 1800 degrees Fahrenheit?	Yes	□No
<ol> <li>Manufacturer's recommended capacity:</li></ol>	Yes	□No
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		□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 - ☐ Yes	□No
f. Did the facility demonstrate compliance during the last VE test?  If no, what was the problem (if known)?	- Yes	□No
PART II: <u>VISIBLE EMISSIONS TESTING</u>	(check <b>☑</b> box for each	only one question)
1. Was a visible emissions test conducted by the facility for this unit during this site visit?a. Operating capacity during test?	- Yes	□No
<ul> <li>b. Was the operating capacity greater than the manufacturer's recommended capacity?</li> <li>c. Was the test conducted with the unit operating at a capacity that is representative of normal operations</li> <li>d. Was the visible emissions test conducted according to EPA Method 9?</li> <li>e. The visible emission test resulted in an opacity of % for the highest six minute average.</li> </ul>	? Yes	□No □No □No
f. Did the visible emission test demonstrate compliance with the limit?		□No
2. Was a visible emissions test conducted by the inspector during this site visit? a. Operating capacity during test?		□No
<ul> <li>b. Was the operating capacity greater than the manufacturer's recommended capacity?</li> <li>c. Was the test conducted with the unit operating at a capacity that is representative of normal operations</li> <li>d. Was the visible emissions test conducted according to EPA Method 9?</li> <li>e. The visible emission test resulted in an opacity of % for the highest six minute average.</li> </ul>	? Yes	□No □No □No
f. Did the visible emission test demonstrate compliance with the limit?		□No
3. Is there any reason to ask for a special test to determine compliance with the PM and CO standard	ırds? □ Yes	□No
If yes, what reason?		

PART III: MONITORING/RECORDKEEPING REQUIREMENTS	(check 🗹	only one
	box for each	
1. Were there any objectionable odors detected?	☐ Yes	□No
An upwind/downwind survey of the facility was conducted. The observed parameters were:	_	
Wind direction Downwind odor level detected Upwind odor level detected-	Scale: 1-10	(worst)
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		
time at $\Box 1,800^1$ $\Box 1,600^2$ degrees was determined?	☐ Yes	□No
(Application of initial nonlication. Teceived on of area 6/30/67, Teceived before 6/30/67)		
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	- Nes	□No
(3) All CEMS or monitoring device calibration checks (last performed on)	Yes	□No
(4) Adjustments		□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 <b>after 2/1/07</b> ? If no, skip e.(1) – (3)	☐ Yes	□No
(1) Is the crematory unit equipped and operated with a pollutant monitoring system to automatic		
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
		1 11 10
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?		□No
(3) Has the opacity measurement system been cleaned and checked for proper operation in	Yes	□No
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?		No
(3) Has the opacity measurement system been cleaned and checked for proper operation in	☐ Yes (check 🗹	No
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?	☐ Yes (check 🗹	No
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule? ————————————————————————————————————	☐ Yes (check 🗹	No
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?	☐ Yes  (check ☑ box for each	only one question)
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?	☐ Yes  (check ☑ box for each	No
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?	☐ Yes  (check ☑ box for each	only one question)
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule? ————————————————————————————————————	☐ Yes  (check ☑ box for each  ☐ Yes  ion	only one question)
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?	☐ Yes  (check ☑ box for each  ☐ Yes  ion	only one question)
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?	☐ Yes  (check ☑ box for each  ☐ Yes  ☐ Yes  ☐ Yes	only one question)
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?	Yes  (check  box for each  Yes  Yes  Yes  Yes  Yes  Yes	only one a question)
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?	☐ Yes  (check ☑ box for each  ☐ Yes  ☐ Yes  ☐ Yes	only one a question)
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?	Yes  (check  box for each  Yes  Yes  Yes  Yes  Yes  (check  Yes	only one a question) NoNoNoNoNo only one
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?	Yes  (check  box for each  Yes  Yes  Yes  Yes  Yes  Yes  Yes	only one a question) NoNoNoNoNo only one
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?	Yes  (check  box for each  Yes  Yes  Yes  Yes  Yes  (check  Yes	only one a question) NoNoNoNoNo only one
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?	☐ Yes  (check ☑ box for each  ☐ Yes  ion ☐ Yes  ☐ Yes  (check ☑ box for each	only one a question) NoNoNoNoNo only one
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?	☐ Yes  (check ☑ box for each  ☐ Yes  ion ☐ Yes  ☐ Yes  (check ☑ box for each	only one a question) NoNoNoNo only one a question)
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?	Yes  (check  box for each  Yes  Yes  Yes  Yes  Yes  (check  box for each  tainers,	only one a question) NoNoNoNoNo only one
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule?  PART IV: SECONDARY COMBUSTION ZONE TEMPERATURES  1. If the application to construct was BEFORE 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 cremated process begins in the primary chamber?  2. If the application to construct ON or AFTER 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 cremated process begins in the primary chamber?  PART V: ALLOWED MATERIALS  1. Besides animal remains and, if applicable, the bedding associated with the animals and appropriate contains are any other materials, including biomedical wastes, incinerated in the unit?	Yes  (check  box for each  Yes  Yes  Yes  Yes  Yes  (check  box for each  tainers,	only one a question) NoNoNoNo only one a question)
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule? ————————————————————————————————————	Yes  (check  box for each  Yes  Yes  Yes  Yes  (check  box for each  Yes	only one a question) NoNoNo only one a question)
(3) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule? ————————————————————————————————————	☐ Yes  (check ☑ box for each  ☐ Yes  ion ☐ Yes  ☐ Yes  (check ☑ box for each  atainers, ☐ Yes  ☐ Yes	only one a question) NoNoNoNo only one a question)

PART VI: <u>EQUIPMENT MAINTENANCE</u>	(check <b>☑</b> box for each	-					
<ol> <li>Is the crematory unit maintained in accordance with the manufacturer's specifications?</li></ol>		No  No  No  No  No					
PART VII: EU INSPECTION COMPLIANCE STATUS (check ☑ only one box)  ☐ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPLIANCE							

## Emissions Unit Section 19 -test

PART I: FILE REVIEW PRIOR TO INSPECTION	(check 🗹	only one
1. a. Complete AC application or, if no AC permit, initial GP registration received on or after August 30, 1989?	box for each Yes	question)
b. If yes, were design calculations provided then to confirm a sufficient volume in the secondary chamber combustion zone to provide for at least a 1.0 second gas residence time at 1800 degrees Fahrenheit?	☐ Yes	□No
2. Manufacturer's recommended capacity:	Yes	□No
5. 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?  f. Did the facility demonstrate compliance during the last VE test?  If no, what was the problem (if known)?	☐ Yes ☐ Yes ☐ Yes	□No □No □No
PART II: <u>VISIBLE EMISSIONS TESTING</u>	(check ☑ box for each	only one
1. Was a visible emissions test conducted by the facility for this unit during this site visit?	<ul><li>☐ Yes</li><li>☐ Yes</li><li>☐ Yes</li><li>☐ Yes</li><li>☐ Yes</li></ul>	No  No  No  No  No
2. Was a visible emissions test conducted by the inspector during this site visit?	☐ Yes	NoNoNoNoNo
3. Is there any reason to ask for a special test to determine compliance with the PM and CO standard If yes, what reason?	ds? ☐ Yes	□No

PA	RT III: MONITORING/RECORDKEEPING REQUIREMENTS	(check	only one
		box for each question)	
1.	Were there any objectionable odors detected?	☐ Yes	□No
	An upwind/downwind survey of the facility was conducted. The observed parameters were:		
	Wind direction Downwind odor level detected Upwind odor level detected	Scale: 1-1	0 (worst)
2	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 $\square$ 1,800 <sup>1</sup> $\square$ 1,600 <sup>2</sup> degrees was determined?	Yes Yes	□No
	(Application of initial notification. Teceived on of after 8/30/89, Teceived before 8/30/89)		
c.	Are the following records kept on file, available for inspection, for at least the past two years?		
	(1) All temperature measurements	Yes 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	□No
	(4) Adjustments	Yes	□No
	(5) Preventive maintenance performed on systems/devices	Yes	□No
	(6) Corrective maintenance performed on systems/devices	Yes 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 <b>after <math>2/1/07</math>?</b> If no, skip $e(1) - (3)$	∐ Yes	□No
	(1) Is the crematory unit equipped and operated with a pollutant monitoring system to automatic control combustion based on continuous in-stack opacity measurement?		□No
	(2) Is the system calibrated to restrict combustion in the primary chamber whenever any opacity		, \o
	exceeds 15% opacity?	Yes 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
	accordance with the manufacturer s recommended maintenance schedule:		
		(check	only one ach question)
PA	ART IV: SECONDARY COMBUSTION ZONE TEMPERATURES	box for ea	ich question)
1.	If the application to construct was <b>BEFORE</b> August 30, 1989 is the:		
	a. actual operating temperature of the secondary chamber combustion zone no less than $1400^{\circ}F$		
	throughout the combustion process in the primary chamber?b. secondary chamber combustion zone temperature equal to or greater than <b>1400°F</b> before the cremat	Yes	□No
	process begins in the primary chamber?	Yes	□No
2			
۷.	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 <b>1600°F</b>		
	throughout the combustion process in the primary chamber?	☐ Yes	□No
	b. secondary chamber combustion zone temperature equal to or greater than $1600^{\circ}F$ before the cremater than $1600^{\circ}F$		
	process begins in the primary chamber?	Yes	LNo
		(check	•
PA	ART V: <u>ALLOWED MATERIALS</u>	box for ea	nch question)
1.	Besides animal remains and, if applicable, the bedding associated with the animals and appropriate con	tainers,	
	are any other materials, including biomedical wastes, incinerated in the unit?	Yes	□No
	If yes, what other materials?		
2	Do containers contain no more than 0.5 percent by weight chlorinated plactics		
۷.	Do containers contain no more than 0.5 percent by weight chlorinated plastics as certified by the manufacturer?	☐ Yes	□No
	If yes, is the certifying documentation from the manufacturer kept on file for at least 2 years from use?		□No

PART VI: EQUIPMENT MAINTENANCE	(check 🗹 box for each o	only one question)		
<ol> <li>Is the crematory unit maintained in accordance with the manufacturer's specifications?</li></ol>		□No		
		□No		
a. Was the flame characteristic visually checked at least once during each operating shift?     b. Was the flame adjusted when necessary?	☐ Yes ☐ Yes	□No □No		
PART VII: EU INSPECTION COMPLIANCE STATUS (check ☑ only one box)				
☐ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPL	IANCE			
Facility Section (continued)				
SPECIAL CONDITIONS AND PROCEDURES	(check <b>☑</b> box for each	only one question)		
Administrative Changes:				
<ol> <li>Were there any changes in the name, address, or phone number of the facility or authorized representat 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?</li> <li>If yes, did the facility provide written notification within 30 days of the change?</li></ol>	ts or Yes	□No □No		
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?	Yes Yes	□No □No □No □No □No		
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	□No		
Inspector's Name (Please Print)  Date of Inspection				
Inspector's Signature Approximate Date of Next Insp	pection			
COMMENTS:				