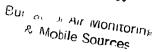
HUMAN CREMATORY AIR GENERAL PERMIT REGISTRATION FORM

MAY 2 8 2009



Part II. Notification to Permitting Office

(Detach and submit to appropriate permitting office; keep copy onsite)

Instructions: To give notice to the Department of an eligible facility's intent to use this air general permit, the owner or operator of the facility must detach and complete this part of the Air General Permit Registration Form and submit it to the appropriate Department of Environmental Protection or local air pollution control program office which has permitting authority. Please type or print clearly all information, and enclose the appropriate air general permit registration processing fee pursuant to Rule 62-4.050(4)(0), F.A.C. (\$100 as of the effective date of this form)

Registration Type		08/0087-00	
Check one:			
INITIAL REGISTRATION - Notifice ☐ Construct and operate a proposed ☐ Operate an existing facility not cur air operation permit to an air gene	new facility. rrently using an air general	permit (e.g., a facility proposing to go from an	
	er expiration of the current er a change of ownership. ing re-registration pursuant	term of air general permit use. t to Rule 62-210.310(2)(e), F.A.C., or any	
other change not considered an ad	ministrative correction und	ler Rule 62-210.310(2)(d), F.A.C.	
Surrender of Existing Air Operation F	Permit(s) - For Initial Reg	gistrations Only	
or operator upon the effective date of this	s air general permit. In suc	ch permit(s) must be surrendered by the owner ch case, check the first box, and indicate the e held by the facility, check the second box.	
All existing air operation permits if general permit; specifically permit 0810087		surrendered upon the effective date of this air	
☐ No air operation permits currently	exist for this facility.		
General Facility Information			
Facility Owner/Company Name (Name of		ndividual owner who or which owns, leases,	
operates, controls, or supervises the facility.) Service Corporation International			
Solvice Componential International			
Site Name (Name, if any, of the facility site; e.g., Plant A, Metropolis Plant, etc. If more than one facility is owned, a registration form must be completed for each.)			
Manasota Crematory			
Facility Location (Provide the physical location of the facility, not necessarily the mailing address.) Street Address: 1221 53rd Ave.			
City:Bradenton	County:Manatee	Zip Code:34203	

Owner/Authorized Representative

Name and Position Title (Person who, by signing this form below, certifies that the facility is eligible to use this air general permit.)

Print Name and Title: David Carroll, General Manager

Owner/Authorized Representative Mailing Address

Organization/Firm:Service Corporation International

Street Address: 1221 53rd Ave.

City:Bradenton

County: Manatee

Zip Code:34203

Owner/Authorized Representative Telephone Numbers

Telephone: (941) 755-2688

Fax:(941) 758-2934 ·

Cell phone (optional):

Facility Contact (If different from Owner/Authorized Representative)

Name and Position Title (Plant manager or person to be contacted regarding day-to-day operations at the facility.)
Print Name and Title:Jan Miller, Crematory Manager

Facility Contact Mailing Address

Organization/Firm:Service Corporation International

id W Carrolf

Street Address: 1221 53rd Ave.

City:Bradenton

County:Manatee

Zip Code:34203

Facility Contact Telephone Numbers

Telephone: (941) 753-0272

Fax:(941) 756-2474

Cell phone (optional):

Owner/Authorized Representative Statement

This statement must be signed and dated by the person named above as owner or authorized representative I, the undersigned, am the owner or authorized representative of the owner or operator of the facility addressed in this Air General Permit Registration Form. I hereby certify, based on information and belief formed after reasonable inquiry, that the facility addressed in this registration form is eligible for use of this air general permit and that the statements made in this registration form are true, accurate and complete. Further, I agree to operate and maintain the facility described in this registration form so as to comply with all applicable standards for control of air pollutant emissions found in the statutes of the State of Florida and rules of the Department of Environmental Protection and revisions thereof.

I will promptly notify the Department of any changes to the information contained in this registration

W Cu

5/12/2009

Design Calculations
If this is an initial registration for a proposed new human crematory unit, provide design calculations 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 F.

Manufacturer's' design calculations attached.

Registration is not for proposed new human crematory unit(s).

Description of Facility

Below, or as an attachment to this form, provide a description of all crematory operations at the facility in sufficient detail to demonstrate the facility's eligibility for use of this air general permit and to provide a basis for tracking any future equipment or process changes at the facility. Describe all air pollutant-emitting processes and equipment at the facility, and identify any air pollution control measures or equipment used.

The purpose of this Air General Permit Registration is to continue to operate two cremation units at this site.

EU-01 is a B&L Cremations Systems Model N20AA Human Cremator.

EU-02 is a IEE Super Power-Pak Model IE43-SPP human cremator.

Both units are natural gas fired and operate at a minimum of 1600 deg. F. The secondary chamber resonance time is greater than one second.

NOT CORRECT INFORMATION -SEE ATTACHED ADDENDUM TO THIS APPLICATION, PAGE 10.

Dibble, Dickson

From:

Kaye Arlington [karlington@arlingtonenvironmental.com]

Sent:

Thursday, June 11, 2009 4:12 PM

To:

Dibble, Dickson

Subject:

RE: Please return my call, I have two issues to discuss, and they are...

Attachments:

SCI Manasota Crematory 5-4-09.pdf

Hi Dick,

Attached is the correct permit registration for SCI Manasota Crematory.

Debra should have submitted page 7 of the Oldcastle Fort Pierce-Tumbler to you this morning.

I apologize for the inconvenience.

Have a great evening,

Kaye Arlington

Arlington Environmental Services, Inc.

Post Office Box 657 Okeechobee, FL 34973 Phone: 863.467.0555

Fax: 863.357.0810

Website: www.arlingtonenvironmental.com

From: Dibble, Dickson [mailto:Dickson.Dibble@dep.state.fl.us]

Sent: Wednesday, June 03, 2009 8:36 AM **To:** karlington@arlingtonenvironmental.com

Cc: Ajhar, Rebecca; barlington@arlingtonenvironmental.com

Subject: Please return my call, I have two issues to discuss, and they are...

Dear Kaye,

First. on Friday. May 29th I called and left a message on your phone regarding the following facility:

AIRS ID# 0810087

SERVICE CORPORATION INTERNATIONAL

MANASOTA CREMATORY

1221 53rd Ave

Bradenton, FL 34203

The information on the form which you submitted on their behalf does not match our database. Furthermore, after contacting them (Jan Miller, Crematory Mgr.) the equipment that he says he has at his facility does not match what is on your form or in our database. We need some updated information in order to proceed with the review and renewal processes.

Secondly, you have submitted a partial CCB Plant Air General Permit registration form on behalf of OLDCASTLE COASTAL INC., VENA 3 FORT PIERCE according to your cover letter. The problem is that we are missing the very first page, Page 7 of the form. Your letter was stapled to Page 8, 9, & 10 of the form, but did not include Page 7.

Please help me in correcting these issues so that I don't have to deny the entitlements.

Thank you and have a great day!

Dick

Dickson E. Dibble, ES III

FL Dept of Environmental Protection Div. of Air Resource Management Bureau of Air Monitoring & Mobile Sources Air General Permit Program Tel. (850) 921-9586 FAX (850) 922-6979 ICG-#345

Dickson.Dibble@dep.state.fl.us



Please note: Florida has a very broad public records law. Most written communications to or from state officials regarding state business are public records available to the public and media upon request. Your e-mail communications may therefore be subject to public disclosure

The Department of Environmental Protection values your feedback as a customer. DEP Secretary Michael W. Sole is committed to continuously assessing and improving the level and quality of services provided to you. Please take a few minutes to comment on the quality of service you received. Simply click on https://doi.org/10.1001/jhis.link.no.nih.gov/. Thank you in advance for completing the survey.

* ADDENDUM TO DEIGINAL REGISTRATION FORM. RECEIPT DATED MAY 26, 2009, SER PAGE 10

HUMAN CREMATORY AIR GENERAL PERMIT REGISTRATION FORM

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Registration Type				
Check one:				
INITIAL REGISTRATION - Notification of intent to:				
Construct and operate a proposed of Operate an existing facility not cur air operation permit to an air generation	rently using an air general p	permit (e.g., a facility proposing to go from an		
	er expiration of the current t er a change of ownership. ing re-registration pursuant	erm of air general permit use. to Rule 62-210.310(2)(e), F.A.C., or any		
other change not considered an add	ninistrative correction unde	r Rule 62-210.310(2)(a), r.A.C.		
Surrender of Existing Air Operation P	'ermit(s) - For Initial Regi	strations Only		
If the facility currently holds one or more air operation permits, such permit(s) must be surrendered by the owner or operator upon the effective date of this air general permit. In such case, check the first box, and indicate the operation permits being surrendered. If no air operation permits are held by the facility, check the second box.				
All existing air operation permits f general permit; specifically permit 0810087		irrendered upon the effective date of this air		
No air operation permits currently	exist for this facility.			
General Facility Information				
		dividual owner who or which owns, leases,		
Service Corporation International				
Site Name (Name, if any, of the facility site; e.g., Plant A, Metropolis Plant, etc. If more than one facility is owned, a registration form must be completed for each.)				
Manasota Crematory				
Facility Location (Provide the physical location of the facility, not necessarily the mailing address.) Street Address: 1221 53rd Ave.				
City:Bradenton	County:Manatee	Zip Code:34203		

Facility Start-Up Date (Estimated start-up date of proposed **new** facility.) (N/A for existing facility) N/A

Owner/Authorized Representative

Name and Position Title (Person who, by signing this form below, certifies that the facility is eligible to use this air general permit.)

Print Name and Title: David Carroll, General Manager

Owner/Authorized Representative Mailing Address

Organization/Firm:Service Corporation International

Street Address: 1221 53rd Ave.

City:Bradenton

County: Manatee

Zip Code:34203

Owner/Authorized Representative Telephone Numbers

Telephone: (941) 755-2688

Cell phone (optional):

Fax:(941) 758-2934

Facility Contact (If different from Owner/Authorized Representative)

Name and Position Title (Plant manager or person to be contacted regarding day-to-day operations at the facility.)
Print Name and Title: Jan Miller, Crematory Manager

Facility Contact Mailing Address

Organization/Firm:Service Corporation International

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Street Address: 1221 53rd Ave.

City:Bradenton

County:Manatee

Zip Code:34203

Facility Contact Telephone Numbers

Telephone: (941) 753-0272

Cell phone (optional):

Fax:(941) 756-2474

Owner/Authorized Representative Statement

This statement must be signed and dated by the person named above as owner or authorized representative I, the undersigned, am the owner or authorized representative of the owner or operator of the facility addressed in this Air General Permit Registration Form. I hereby certify, based on information and belief formed after reasonable inquiry, that the facility addressed in this registration form is eligible for use of this air general permit and that the statements made in this registration form are true, accurate and complete. Further, I agree to operate and maintain the facility described in this registration form so as to comply with all applicable standards for control of air pollutant emissions found in the statutes of the State of Florida and rules of the Department of Environmental Protection and revisions thereof.

I will promptly notify the Department of any changes to the information contained in this registration

Signature

5/12/200

Design Calculations
If this is an initial registration for a proposed new human crematory unit, provide design calculations 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 F.
☐ Manufacturer's' design calculations attached.
Registration is not for proposed new human crematory unit(s).
Description of Facility
Below, or as an attachment to this form, provide a description of all crematory operations at the facility in sufficient detail to demonstrate the facility's eligibility for use of this air general permit and to provide a basis for tracking any future equipment or process changes at the facility. Describe all air pollutant-emitting processes and equipment at the facility, and identify any air pollution control measures or equipment used.
The purpose of this Air General Registration is to allow SCI Manasota Crematory to continue to operate two human crematories. Each crematory has a process rate of 150 pounds of human remains per hour.
Unit 1 is an IEE Super Power-Pak IE43-SPP human cremator. Emissions are controlled by an afterburner with a maintained temperature of 1,600 degrees Fahrenheit in the secondary chamber. The secondary chamber is designed to ensure a one second residence time of 1,800 degrees Fahrenheit. Temperature is monitored with a continuous temperature recorder.
Unit 2 is an IEE Super Power-Pak IE43-SPP human cremator. Emissions are controlled by an afterburner with a maintained temperature of 1,600 degrees Fahrenheit in the secondary chamber. The secondary chamber is designed to ensure a one second residence time of 1,800 degrees Fahrenheit. Temperature is monitored with a continuous temperature recorder.



Arlington Environmental Services, Inc.

"Specializing in Visible Emission and Stack Testing"

May 22, 2009

FDEP Receipts Post Office Box 3070 Tallahassee, FL 32315-3070

Re: SCI Manasota Memorial AIRS ID 0810087

To Whom It May Concern:

Enclosed are the following items:

- 1. One completed Human Crematory Air General Registration Form for the above referenced facility.
- 2. Check 29217401 for \$100.00 made payable to the Florida Department of Environmental Protection.

If you have any questions, please feel free to call me at 863/467-0555 or email me at barlington@arlingtonenvironmental.com.

Sincerely,

William D. Arlington

WDA/dc

Electronic Copy to: Jan Miller, SCI Manasota Memorial

WEST PALM BCH FL 334 23 MAY 2009PN 3 L



FDEP Receipts Post Office Box 3070 Tallahassee, FL 32315-3070

32315+3070

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