



Florida Department of Environmental Protection

Bob Martinez Center
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

November 5, 2007

Mr. Curtis Craig
All God's Creatures
2110 West Poinsettia Drive
Port Orange, Florida 32128

Dear Mr. Craig:


This is to acknowledge that your notification of intent to use the authority of Rule 62-210.310 to operate your facility was received on October 1, 2007. We have assigned ARMS # 1270109-004 to this facility.

As you know, pursuant to Florida Statutes section 403.814, authority to operate under general permits commences thirty days after receipt of the registration form unless you have been notified by this office that your facility has not shown entitlement to operate pursuant to the rule provisions.

For your information, authority to operate pursuant to Rule 62-210.310 expires after 5 years. Therefore, a new registration form must be received no later than 5 years after the date your notice was received as indicated above. If your general permit rule conditions require testing, such testing must be completed within the time frame specified in the rule.

If you have any additional questions, please contact Dickson Dibble at 850/921-9586.

Sincerely,


Sandra F. Veazey, Chief
Bureau of Air Monitoring
and Mobile Sources

SFV/pg

cc: Ms. Caroline Shine, Central District

RECEIVED

**ANIMAL CREMATORY
AIR GENERAL PERMIT REGISTRATION FORM**

OCT 01 2007

Part II. Notification to Permitting Office
(Detach and submit to appropriate permitting office; keep copy onsite)

Bureau of Air Monitoring
& Mobile Sources

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, F.A.C. (\$100 as of the effective date of this form)

1270109-004

Registration Type

Check one:

INITIAL REGISTRATION - Notification of intent to:

- Construct and operate a proposed new facility.
- Operate an existing facility not currently using an air general permit (e.g., a facility proposing to go from an air operation permit to an air general permit).

RE-REGISTRATION (for facilities currently using an air general permit) - Notification of intent to:

- Continue operating the facility after expiration of the current term of air general permit use.
- Continue operating the facility after a change of ownership.
- Make an equipment change requiring re-registration pursuant to Rule 62-210.310(2)(e), F.A.C., or any other change not considered an administrative correction under Rule 62-210.310(2)(d), F.A.C.

Surrender of Existing Air Operation Permit(s) - For Initial Registrations 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 for this facility are hereby surrendered upon the effective date of this air general permit: specifically permit number(s): _____
- No air operation permits currently exist for this facility.

General Facility Information

Facility Owner/Company Name (Name of corporation, agency, or individual owner who or which owns, leases, operates, controls, or supervises the facility.)

All God's Creatures, (Formerly: Craig Kennels)

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.)

Facility Location (Provide the physical location of the facility, not necessarily the mailing address.)

Street Address: 2110 West Poinsettia Drive

City: Port Orange

County: Volusia

Zip Code: 32128

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

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: Curtis Craig, Owner/Operator		
Owner/Authorized Representative Mailing Address Organization/Firm: All God's Creatures Street Address: 2110 West Poinsettia Drive City: Port Orange County: Volusia Zip Code: 32128		
Owner/Authorized Representative Telephone Numbers Telephone: 386-253-8391 Fax: N/A Cell phone (optional): N/A		

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: Same as owner listed above		
Facility Contact Mailing Address Organization/Firm: Street Address: City: County: Zip Code:		
Facility Contact Telephone Numbers Telephone: Fax: Cell phone (optional):		

Owner/Authorized Representative Statement

<p>This statement must be signed and dated by the person named above as owner or authorized representative</p> <p><i>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></p> <p><i>I will promptly notify the Department of any changes to the information contained in this registration form.</i></p> <p>Signature _____ Date <u>09/28/07</u></p>	
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Design Calculations

If this is an initial registration for a proposed new animal 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 animal 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.

This facility operates a Crawford, Model C-700P animal incinerator, and is requesting to renew the general permit for 5 years. The incinerator is equipped with an afterburner that has a minimum operating temperature of 1600 degrees F in the secondary chamber to control emissions. The visible emission test results and certifications are included in Attachment A. This facility will inform Grove Scientific & Engineering prior to any equipment or process changes, and the proper notifications/registration will be filed with the Department.

Attachment A
Visible Emissions Test Report

Source/Process Information				Observation Readings								
Facility Name: <u>All Gods Creatures</u>				Observation Method: <u>EPA Method 9</u>				Start Time: <u>10:09</u>		Stop Time: <u>11:09</u>		
Source Name: <u>Crawford Crematory</u>		Permit No.: <u>1270109-003-AG</u>		Sec. 0	15	30	45	Sec. Min.	0	15	30	45
Location Address: <u>2110 W Pinsetta Dr., Port Orange FL</u>				1	0	0	0	31	0	0	0	0
Contact: <u>Curtis Craig</u>		Phone No.: <u>386-253-8391</u>		2	0	0	0	32	0	0	0	0
Process/Production Rate: <u>cremation of 420 lbs of animals</u>				3	0	0	0	33	0	0	0	0
Control Equipment: <u>afterburner</u>		Operating Mode: <u>71600°F</u>		4	0	0	0	34	0	0	0	0
Fuel Type/Rate: <u>natural gas</u>	Material Type/Rate: <u>120 lbs</u>	Permitted Rate:		5	0	0	0	35	0	0	0	0
Describe Emission Point: <u>large round rust colored stack on roof</u>				6	0	0	0	36	0	0	0	0
Height Above Ground Level: <u>18 ft</u>		Height Relative to Observer: <u>18 ft</u>		7	0	0	0	37	0	0	0	0
Emissions Description				8	0	0	0	38	0	0	0	0
Describe Emissions: Start <u>heat waves only</u> End <u>same</u>				9	0	0	0	39	0	0	0	0
Plume Color: <u>N/A</u>		Plume Type: <u>N/A</u>		10	0	0	0	40	0	0	0	0
Water Droplets Present: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, is plume Attached <input type="checkbox"/> Detached <input type="checkbox"/>				11	0	0	0	41	0	0	0	0
Meteorological Information				12	0	0	0	42	0	0	0	0
Background Start: <u>sky</u> End: <u>same</u>		Background Color Start: <u>blue/white</u> End: <u>blue</u>		13	0	0	0	43	0	0	0	0
Sky Conditions: % Cloud Cover Start: <u>45%</u> End: <u>40%</u>		Ambient Temp Start: <u>78°F</u> End: <u>same</u>		14	0	0	0	44	0	0	0	0
Wind Speed Start: <u>calm</u> End: <u>same</u>		Wind Direction Start: <u>calm</u> End: <u>same</u>		15	0	0	0	45	0	0	0	0
Observation Data, Site Diagram				16	0	0	0	46	0	0	0	0
<div style="display: flex; justify-content: space-between;"> <div> <p>Stack with Plume </p> <p>Sun </p> <p>Wind </p> </div> <div> <p>North Arrow </p> </div> </div> <div style="text-align: center; margin-top: 20px;"> <p>Emissions Point</p> <p>Observer's Position</p> <p>Distance: <u>35'</u></p> <p>Sun Location Line: <u>140°</u></p> <p><u>Calm</u></p> </div>				17	0	0	0	47	0	0	0	0
18	0	0	0	48	0	0	0	0	0			
19	0	0	0	49	0	0	0	0	0			
20	0	0	0	50	0	0	0	0	0			
21	0	0	0	51	0	0	0	0	0			
22	0	0	0	52	0	0	0	0	0			
23	0	0	0	53	0	0	0	0	0			
24	0	0	0	54	0	0	0	0	0			
25	0	0	0	55	0	0	0	0	0			
26	0	0	0	56	0	0	0	0	0			
27	0	0	0	57	0	0	0	0	0			
28	0	0	0	58	0	0	0	0	0			
29	0	0	0	59	0	0	0	0	0			
30	0	0	0	60	0	0	0	0	0			
Compliance Information				Certification Data, Signatures								
Range of Opacity Readings: Min <u>0</u> Max <u>0</u>				Observer's Name: <u>Sara Hummel</u>								
Average of Highest 24 Consecutive Readings: <u>0</u>				Observer's Signature: <u>Sara Hummel</u>						Date: <u>7-5-07</u>		
Short Term Average Data: Averaging Period <u>3</u> minutes Actual Average <u>0</u> %				Organization: <u>Grove Scientific & Engineering Co.</u>						Date: <u>7-8-07</u>		
Comments: <u>no objectional odors detected</u>				Certified By: <u>EPA</u>						Date: <u>7-8-07</u>		
				I have received a copy of these observations. Signature: _____						Date: _____		
				APIS Number: _____								

VISIBLE EMISSIONS EVALUATOR

This is to certify that

SARA HUMMEL

met the specifications of Federal Reference Method 9 and qualifies as a visible emissions evaluator. Maximum deviation on white and black smoke did not exceed 7.5% opacity and no single error exceeding 15% opacity was incurred during the certification test conducted by Eastern Technical Associates of Raleigh, NC. This certificate is valid for six months from date of issue.

8/8/2007 352641
DATE OF SCHOOL CERT NUMBER
ORLANDO, FL HUM987385
SCHOOL LOCATION STUDENT ID NUMBER

EASTERN TECHNICAL ASSOCIATES

SARA HUMMEL

HUM987385 STUDENT ID NUMBER

met the specifications of Federal Reference Method 9 and qualifies as a visible emissions evaluator. Maximum deviation on white and black smoke did not exceed 7.5% opacity and no single error exceeding 15% opacity was incurred during the certification test conducted by Eastern Technical Associates of Raleigh, NC. This certificate is valid for six months from date of issue and expires on the date below.

Customer Support
Debbie or Sheila

919-878-3188

www.eta-is-opacity.com

ORLANDO, FL	8/8/2007	352641
SCHOOL LOCATION	DATE OF SCHOOL	CERT NUMBER
ORLF06	2/7/2008	
LAST LECTURE	EXPIRATION DATE	BEARER



Visible Emissions Evaluation

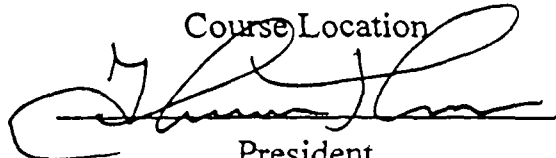
This certifies that...

Para Hummel

...successfully completed a course in the methods of measurement of visible emissions from sources as specified by Federal Reference Methods 9 and 22 conducted by Eastern Technical Associates of Raleigh, North Carolina.

Orlando, Florida

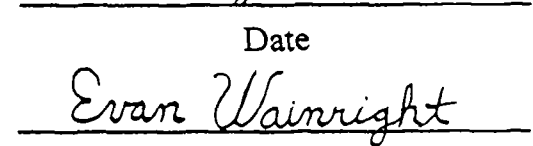
Course Location



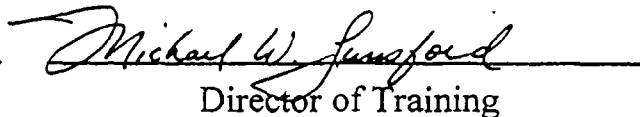
President

August 8, 2006

Date

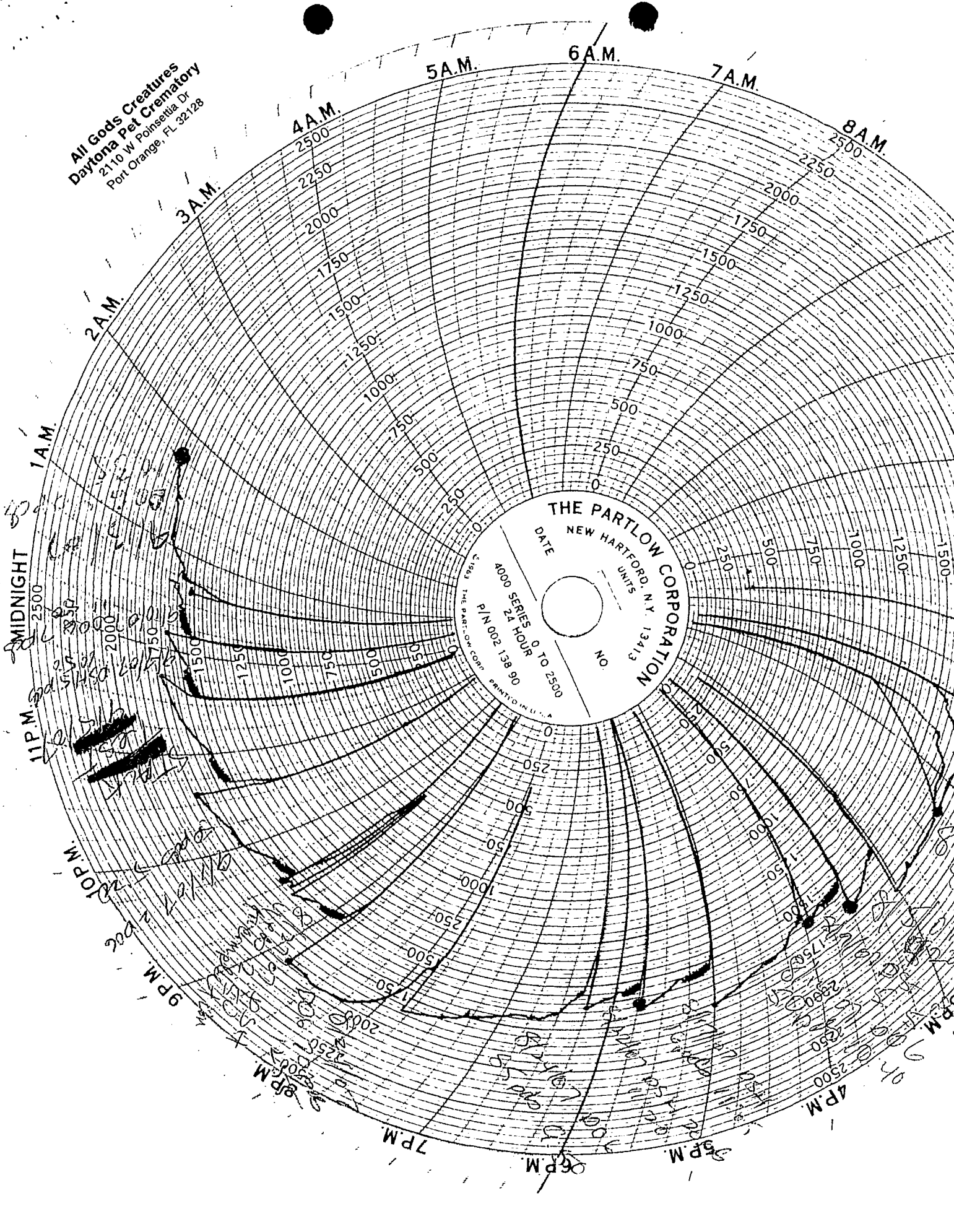


Instructor



Director of Training

All Gods Creatures
Daytona Pet Crematory
2110 W. Polineria Dr
Port Orange, FL 32128



THE PARTLOW CORPORATION
NEW HARTFORD, N.Y. 13413
DATE _____ UNITS _____ NO. _____
4000 SERIES - 0 TO 2500
P/N 002 138 90
© 1983 THE PARTLOW CORP. PRINTED IN U.S.A.

MIDNIGHT
11 P.M.
10 P.M.
9 P.M.
8 P.M.
7 P.M.
6 P.M.
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1 P.M.
MIDNIGHT

1 A.M.
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2500

Handwritten notes and scribbles around the perimeter of the chart, including names like 'D. J. ...' and 'C. ...' and various illegible markings.

SENT TO: ANNE SULLIVAN
MS 177 - 10/13/07



RECEIVED

OCT 01 2007

Bureau of Air Monitoring
& Mobile Sources

September 24, 2007

Sandy Bowman
Division of Air Resource Management
2600 Blair Stone Road, MS 5510
Tallahassee, Florida 32399-2400

**RE: All God's Creatures (Formerly Craig's Kennels)
Air General Permit Registration
Permit Number: 1270109-003-AG**

Dear Ms. Bowman:

Enclosed are two (2) copies of the above referenced application along with a check in the amount of \$100.00 for the application fee. The compliance test report is included in Attachment A.

If you have any questions, please e-mail me at sara@grovescientific.com or call me at (407) 298-2282.

Respectfully,
GROVE SCIENTIFIC & ENGINEERING COMPANY


Sara Greivell
Environmental Scientist

cc: Curtis Craig - Craig Kennels

All God's Creatures Sub Letter / 330000 / 092407

FedEx Express **US Airbill**

8592 5724 9391

0200

Form ID No.

FedEx Retrieval Copy

fedex.com 1.800.GoFedEx 1.800.463.3339

1 From
 Date: 9/28 Sender's FedEx Account Number: _____
 Sender's Name: ALL Good Creatures Phone: 386 2536 391
 Company: _____
 Address: 2110 W. Poinsettia DR Dept./Floor/Suite/Room: _____
 City: Port Orange State: FL ZIP: 32128
2 Your Internal Billing Reference
 Paid CK. 1386
3 To
 Recipient's Name: Sandy Bowman Phone: _____
 Company: Division of Client Resource Management
 Recipient's Address: 2600 Blair Stone Road MS 5510 Dept./Floor/Suite/Room: _____
 Address: Tallahassee, FL 32399-2400
 City: _____ State: _____ ZIP: _____



8592 5724 9391

4a Express Package Service Packages up to 150 lbs.¹

1 FedEx Priority Overnight Next business morning.* Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected. 5 FedEx Standard Overnight Next business afternoon.* Saturday Delivery NOT available. 6 FedEx First Overnight Earliest next business morning delivery to select locations.* Saturday Delivery NOT available.

3 FedEx 2Day Second business day.* Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected. FedEx Envelope rate not available. Minimum charge: One-pound rate. 20 FedEx Express Saver Third business day.* Saturday Delivery NOT available. * To most locations.

4b Express Freight Service Packages over 150 lbs.

7 FedEx 1Day Freight* Next business day.** Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected. 8 FedEx 2Day Freight Second business day.** Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected. 83 FedEx 3Day Freight Third business day.** Saturday Delivery NOT available. * Call for Confirmation: ** To most locations.

5 Packaging

6 FedEx Envelope* 2 FedEx Pak* Includes FedEx Small Pak, FedEx Large Pak, and FedEx Sturdy Pak. 3 FedEx BOX 4 FedEx Tube 1 Other * Declared value limit \$500.

6 Special Handling Include FedEx address in Section 3.

3 SATURDAY Delivery Not available for FedEx Standard Overnight, FedEx First Overnight, FedEx Express Saver, or FedEx 3Day Freight. 1 HOLD Weekday at FedEx Location Not available for FedEx First Overnight. 31 HOLD Saturday at FedEx Location Available ONLY for FedEx Priority Overnight and FedEx 2Day to select locations.

Does this shipment contain dangerous goods? One box must be checked.
 No 4 Yes As per attached Shipper's Declaration. Yes Shipper's Declaration not required. 6 Dry Ice Dry Ice, 9, UN 1845 _____ x _____ kg. Cargo Aircraft Only

Dangerous goods (including dry ice) cannot be shipped in FedEx packaging.

7 Payment Bill to: Enter FedEx Acct. No. or Credit Card No. below. Obtain Recip. Acct. No.

1 Sender Acct. No. in Section 1 will be billed. 2 Recipient 3 Third Party 4 Credit Card 5 Cash/Check

Total Packages: 1 Total Weight: 1 Total Charges: 14.52
 Credit Card Auto

8 NEW Residential Delivery Signature Options If you require a signature, check Direct or Indirect.

No Signature Required Package may be left without obtaining a signature for delivery. 10 Direct Signature Anyone at recipient's address may sign for delivery. Fee applies. 34 Indirect Signature If no one is available at recipient's address, anyone at a neighboring address may sign for delivery. Fee applies.

820

Rev. Date 8/05-Part #158281-01994-2005 FedEx-PRINTED IN U.S.A. SRY

fedex.com 1.800.GoFedEx 1.800.463.3339

Florida Department of Environmental Protection
Cash Receiving Application (CRA)
Cashlisting by Deposit #: 281196 thru 281196
Printed: 10/4/2007 4:17:16 PM - Page 8

Cashlisting: **64399** Cashlist Area: **3755** Description: **DIV OF AIR RESOURCES MGMT.**
 Deposit No: **281196** Date Deposited: **10/04/2007** Contact: **PATTY ADAMS**

Object	Transmittal	Dep DDN	Receipt Number	Pre-Numbered Receipt	Name	Check Number	Payment Amount	Reference Account	Payment Number	Remittance Number	Fund
002272	45077	477158	602298		NORTH FLORIDA ANIMAL HOSPITAL	11495	\$100.00		842345	750636	PFTF
	45077	477163	602303		GRIFFITH-CLINE FUNERAL AND CRE	3174	\$100.00		842352	750641	PFTF
	45077	477164	602304		CEMEX INC	01693217	\$100.00		842355	750642	PFTF
	45099		602393		ALL GODS CREATURES	1385	\$100.00	1270109	842454	750741	PFTF
	45099		602394		HUTCHINS CO	22994	\$100.00	10/19/2007	842456	750742	PFTF
Object Code 002272 Subtotal:							\$500.00				
002273	45077	477153	602293		FORTINENTAL LLC	1353	\$75.00	251132	842340	750631	APCTF
	45077	477155	602295		BARRY DRYCLEANERS AND LAUNDRY	7982	\$75.00	251074	842342	750633	APCTF
	45077	477156	602296		SARLAZ INTERNATIONAL INC	5594	\$75.00	250732	842343	750634	APCTF
Object Code 002273 Subtotal:							\$225.00				
002278	45077	477154	602294		ACT	5984	\$200.00	45768	842341	750632	APCTF
Object Code 002278 Subtotal:							\$200.00				
Cashlisting 64399 Total:							\$925.00				

