

**HUMAN CREMATORIES  
AIR GENERAL PERMIT REGISTRATION**

**Facility Identification Number (If known)**

**0112152**

**Registration Type**

**0112152 - 006**

Check one:

**INITIAL REGISTRATION** - Notification of intent to:

- Construct and operate a proposed new facility.
- Operate an existing permitted 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). 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. (See "Surrender of Existing Air Operation Permit(s)" below.)
- Operates an existing facility not currently permitted or using 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 Applicable**

All existing air operation permits for this facility are hereby surrendered upon the effective date of this air general permit; specifically permit number(s):

**0112152-005-AG**

**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.)

**SCI Funeral Services of Florida, Inc.**

Site Name (Name, if any, of the facility site; e.g., Plant A, Metropolis Plant, etc. If more than one facility is owned, a complete registration must be submitted for each.)

**Gold Coast Crematory**

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

Street Address: **796 NW 57<sup>th</sup> Street**

City: **Ft. Lauderdale**

County: **Broward**

Zip Code: **33309-2825**

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

**N/A**

**Facility Contact**

Name and Position Title (Plant manager or person to be contacted regarding day-to-day operations at the facility.)

Print Name and Title: **Daniel D'Andrea**

Facility Contact Telephone Numbers

Telephone: **(954) 946-2900**

Fax: **(954) 782-4076**

Cell phone:

E-mail: **daniel.d'andrea@sci-us.com**

Facility Contact Mailing Address

Organization/Firm: **Gold Coast Crematory**

Street Address: **796 Northwest 57<sup>th</sup> Street**

City: **Ft. Lauderdale**

County: **Broward**

Zip Code: **33309-2825**

**Other Contact/Representative (to serve as additional Department contact)**

Name and Position Title

Print Name and Title: **Jose Martorell**

Other Contact/Representative Telephone Numbers

Telephone: **(954) 946-2900**

Fax: **(954) 782-4076**

Cell phone:

E-mail: **jose.martorell@sci-us.com**

Other Contact/Representative Representative Mailing Address

Organization/Firm: **Gold Coast Crematory**

Street Address: **796 Northwest 57<sup>th</sup> Street**

City: **Ft. Lauderdale**

County: **Broward**

Zip Code: **33309-2825**

**Emission Unit Details**

MANUFACTURER	MODEL NUMBER	SERIAL NUMBER	RATED CAPACITY
EU-001 Matthews	IEE-Power Pak II	494329	150 lbs/hr
EU-002 Matthews	IEE-Power Pak II	584329	150 lbs/hr
EU-003 Matthews	IEE-Power Pak II	10921194	150 lbs/hr
EU-004 B & L	Phoenix II-C	557-340-01	150 lbs/hr
EU-005 Therm-Tec	SQC-300	14142	150 lbs/.hr
EU-006 Therm-Tec	SQC-300	14143	150 lbs/.hr
EU-007 Therm-Tec	SQC-300	18374	

**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.

See Design Calculations.

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

**Facility Comments**

EU-007 is a proposed new crematory. The design calculations for retention time for this unit are attached.

**Design Calculations**

Retention Time = 1.15 seconds @ 1800 deg. F (see attached)



# *Arlington Environmental Services, Inc.*

Post Office Box 657 ~ Okeechobee, Florida 34973  
605 SW Park Street, Suite 209, Okeechobee, Florida 34974  
Telephone (863) 467-0555 ~ Facsimile (863) 357-0810  
[www.arlingtonenvironmental.com](http://www.arlingtonenvironmental.com)

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September 4, 2012

FDEP  
Receipts  
3800 Commonwealth Blvd.  
Mail Station 77  
Tallahassee, FL 32399

Re: SCI Funeral Services of Florida, Inc. - Gold Coast Crematory  
AIRS ID 0112152

To Whom It May Concern:

Enclosed are the following items:

1. A completed Human Crematory Air General Permit Registration Form for the above referenced facility.
2. Check No. 5386 in the amount of \$100.00 payable to Florida Department Environmental Protection.

If you have any questions, please feel free to call me at 863/467-0555 or email me at [karlington@arlingtonenvironmental.com](mailto:karlington@arlingtonenvironmental.com).

Sincerely,

Kaye Arlington

Electronic Copy to: Dan D'Andrea, Gold Coast Crematory  
Dean Robbins, Therm Tec, Inc.