

RECEIVED

HUMAN CREMATORIES
AIR GENERAL PERMIT EXAMPLE REGISTRATION WORKSHEET

FEB 28 2012

**DIVISION OF AIR
 RESOURCE MANAGEMENT**

Facility Identification Number (If known)

0310505

0310505-004

Registration Type

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):

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.)

Quinn-Shalz Funeral Home 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.)

Quinn-Shalz Funeral Home

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

Street Address: 3600 Third Street South

City: Jacksonville Beach

County: Duval

Zip Code: 32250 - 6064

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

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: Darlene Smith, FDIC

Facility Contact Telephone Numbers

Telephone: (904) 249-1100

Fax: (904) 241-7554

Cell phone: _____

E-mail: dsmith@quinn-shalz.com

Facility Contact Mailing Address

Organization/Firm: Quinn-Shalz Funeral Home

Street Address: 3600 Third Street South

City: Jacksonville Beach

County: Duval

Zip Code: 32250

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

Name and Position Title

Print Name and Title: Jenifer McSwain, LFD

Other Contact/Representative Telephone Numbers

Telephone: (904) 249-1100

Fax: (904) 241-7554

Cell phone: _____

E-mail: jmcswain@quinn-shalz.com

Other Contact/Representative Representative Mailing Address

Organization/Firm: _____

Street Address: _____

City: _____

County: _____

Zip Code: _____

NEED EQUIPMENT DETAILS

*** SEE ATTACHED E-MAIL DATED 03/01/12 AS AN ADDENDUM TO THIS REGISTRATION & PAGE 4 UPDATE.**

Emission Unit Details

MANUFACTURER	MODEL NUMBER	SERIAL NUMBER	RATED CAPACITY

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.

- Design calculations attached.
- Registration is not for proposed new human crematory unit(s).

Helpful Definitions

"Biomedical Waste" - Any solid or liquid waste which may present a threat of infection to humans, including nonliquid-tissue, body parts, blood, blood products, and body fluids from humans and other primates; laboratory and veterinary wastes which contain human disease-causing agents; and discarded sharps. The following are also included:

1. Used absorbent materials saturated with blood, blood products, body fluids, or excretions or secretions contaminated with visible blood; and absorbent materials saturated with blood or blood products that have dried.
2. Non-absorbent, disposable devices that have been contaminated with blood, body fluids, or secretions or excretions visibly contaminated with blood, but have not been treated by a method listed in Section 381.0098, F.S., or a method approved pursuant to Rule 64E-16, F.A.C.

"Department" or "DEP" - The State of Florida Department of Environmental Protection.

"Emissions Unit" - Any part or activity of a facility that emits or has the potential to emit any air pollutant.

"Facility" - All of the emissions units which are located on one or more contiguous or adjacent properties, and which are under the control of the same person (or persons under common control).

"Human Crematory" - Any combustion apparatus used solely for the cremation of either human or fetal remains

"Owner" or "Operator" - Any person or entity who or which owns, leases, operates, controls or supervises an emissions unit or facility.

NEED EQUIPMENT DETAILS

Emission Unit Details

MANUFACTURER	MODEL NUMBER	SERIAL NUMBER	RATED CAPACITY
All Crematory "Matthews International"	2500	A0120501	100 lbs per hour

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.

- Design calculations attached.
- Registration is not for proposed new human crematory unit(s).

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Dibble, Dickson

From: Tara Duncan [tduncan@quinn-shalz.com]
Sent: Thursday, March 01, 2012 10:22 AM
To: Dibble, Dickson
Subject: Human Crematory missing information
Attachments: Human Crematory reg001.pdf

Please find the attached paperwork needed to finalize our current Human Crematory renewal registration. Thank you for your time in this matter.

Best regards,

Tara Duncan

Quinn-Shalz, A Family Funeral Home
& Cremation Centre
3600 Third Street South
Jacksonville Beach, FL 32250
(904) 249-1100
FAX 241-7554

Dibble, Dickson

From: Dibble, Dickson
Sent: Wednesday, February 29, 2012 8:14 AM
To: 'dsmith@quinn-shalz.com'
Cc: Arif, Syed
Subject: Human Crematory Air General Permit Registration/Renewal Worksheet form
Attachments: 0310505-003-AG;QuinnShalzFuneralHomeInc,3600ThirdSt,JacksonvilleBeach.pdf

Tracking:	Recipient	Delivery
	'dsmith@quinn-shalz.com'	
	Arif, Syed	Delivered: 2/29/2012 8:15 AM

Good morning Ms. Smith!

I am in receipt of the subject-item form (see attached .pdf file) for the purpose of renewing your Human Crematory Air General Permit Registration.

I have performed a cursory review of the form and found that the equipment data block on Page four (4) of the worksheet contains no information regarding the equipment being registered. The information requested is required by rule:

(Rule 62-210.310(5)(c)3.b., F.A.C.)

(c) Air General Permit for Facilities Comprising Human Crematories.

1. A facility comprising one (1) or more human crematories shall be eligible to use this air general permit provided it meets the general eligibility criteria of paragraph 62-210.310(2)(a), F.A.C.
2. A facility using this air general permit shall comply with the general conditions given at subsection 62-210.310(3), F.A.C., and the following specific conditions.
 - a. The facility shall comply with all applicable provisions of subsection 62-296.401(5), F.A.C.
 - b. The owner or operator may use a human crematory air general permit and an animal crematory air general permit at the same facility, provided all human crematory units operate under a single human crematory air general permit and all animal crematory units operate under a single animal crematory air general permit.
3. The registration for this air general permit shall include all the following information.
 - a. For an initial registration for a proposed new human crematory unit, 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.
 - b. For each crematory unit, the manufacturer, model number, serial number, and rated capacity.

Before I will be able to continue with the processing and review of your registration I will need to have the requested information.

To make it easy for all, if you could provide the information via return e-mail, I will simply attached the results as an addendum to the current submitted form.

Your attention to this matter will be greatly appreciated. If you have any questions, comments or concerns please e-mail or call.

Thank you and have a great day!

Sincerely yours,

Dickson E. Dibble

Dickson E. Dibble, ES III

Air General Permit Program
FDEP Division of Air Resource Management
Office of Permitting & Compliance
Minerals & Metals Section
Tel. (850) 717-9071

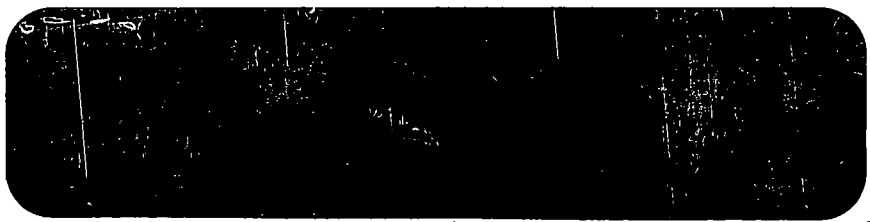
FAX (850) 717-9001
GIC - #59571
Dickson.Dibble@dep.state.fl.us



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

Quinn-Shalz Funeral Home, Inc.
3600 3rd Street South
Jacksonville Beach, FL 32250

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