

RECEIVED

JAN 27 2010

**HUMAN CREMATORY**  
**AIR GENERAL PERMIT REGISTRATION FORM** Bureau of Air Monitoring & Mobile Sources

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

0830056-004

**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.)

HIERS-BAXLEY FUNERAL SERVICES d.b.a. OCALA CREMATORY

**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.)

HIERS FUNERAL HOME

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

Street Address: 910 E. SILVER SPRINGS BLVD.

City: OCALA

County: MARION

Zip Code: 34470-6708

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

FINANCIAL & ACCOUNTING  
REVENUE  
2010 JAN 20 PM 3:37

FLORIDA DEPARTMENT OF  
ENVIRONMENTAL PROTECTION

**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: Dennis K. Baxley, Vice President

Owner/Authorized Representative Mailing Address

Organization/Firm: HIERS-BAXLEY FUNERAL SERVICES

Street Address: 910 E. SILVER SPRINGS BLVD.

City: OCALA

County: MARION

Zip Code: 34470

Owner/Authorized Representative Telephone Numbers

Telephone: (352) 629-7171

Fax: (352) 867-0325

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: Gary Weagley, Crematory Operator

Facility Contact Mailing Address

Organization/Firm: HIERS-BAXLEY FUNERAL SERVICES

Street Address: 910 E. SILVER SPRINGS BLVD.

City: OCALA

County: MARION

Zip Code: 34470

Facility Contact Telephone Numbers

Telephone: (352) 629-7171

Fax: (352) 867-0325

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 form.*

Signature Dennis K Baxley VP

Date 1/18/2010

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION  
2010 JAN 20 PM 3:37  
FINANCE & ACCOUNTING REVENUE

**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.

January 2010: This is for 2010 re-registration of an existing Industrial Equipment & Engineering, Model IE43 - PPII, 100 lb/hr human crematory incinerator. There are no other existing crematories at this location. The current Permit No. 0830056-003-AG expires on 2/21/2010.

The crematory is designed to burn human remains at the average incineration rate of 100 pounds per hour. The incinerator consists of primary and secondary (afterburner) chambers, each fired on natural gas.

Emissions are controlled by the afterburner, which will maintain a minimum secondary chamber combustion zone temperature of 1600°F prior to and during combustion of material in the primary chamber. The secondary chamber is designed to ensure one second residence time at a gas temperature of 1800°F, and is equipped with a continuous temperature monitor and recorder.

The unit is equipped with an opacity monitor that shuts down the cremation burner if excess emissions are encountered in the stack.

FLORIDA DEPARTMENT OF  
ENVIRONMENTAL PROTECTION  
2010 JAN 20 PM 3:38  
FINANCE & ACCOUNTING  
REVENUE

# Southern Environmental Sciences, Inc.

1204 North Wheeler Street □ Plant City, Florida 33563 □ (813) 752-5014 □ Fax: (813) 752-2475

January 15, 2010

Mr. Dennis K. Baxley.  
Vice President  
Hiers-Baxley Funeral Services, Inc.  
910 SE Silver Springs Blvd  
Ocala, Florida 34470

Phone: (352) 629-7171

Re: Air General Permit Re-Registration Form  
Human Crematory Unit  
DEP I.D. No: 0830056  
Hiers Funeral Home / Ocala / Marion County

FLORIDA DEPARTMENT OF  
ENVIRONMENTAL PROTECTION  
2010 JAN 20 PM 3:37  
FINANCE & ACCOUNTING  
REVENUE

3755  
2272

Dear Mr. Baxley:

I spoke with Gary Weagley today, who advised me to maintain you as the signatory for the enclosed air permit documents for renewal of your air permit.

Enclosed for your review are two copies the human crematory air general permit re-registration form for your human crematory. You need to sign and date the **unbound copy** and send it, along with a check in the amount of \$100.00 payable to Florida Dept. of Environmental Protection (FDEP), **ensuring it is received by FDEP no later than Thursday, January 21, 2010 at the following address:**

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

Note: If you send it Via Overnight parcel, send the form and \$100 check to the following physical address:

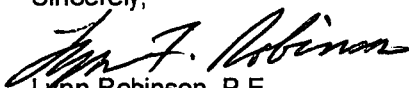
FDEP  
3800 Commonwealth Boulevard, MS-77  
Tallahassee, Florida  
32399  
[Phone: (850) 921-9586]

The second copy (**bound copy**) contains your permit conditions and must be retained onsite with the crematory.

The registration becomes effective 30 days after it is received in Tallahassee with the \$100 fee and is valid for five years.

If you have any questions concerning the permit registration or we can be of any further assistance to you please do not hesitate to call.

Sincerely;



Lynn Robinson, P.E.  
Permitting Manager

Enclosure: Air GP Re-Registration Forms: One (1) unbound copy & One (1) bound copy / 10P49

Cc: Gary Weagley, Crematory Operator

From: Origin ID: OCFA (352) 629-7171  
Sara McGovern  
Hiers-Baxley Funeral Services  
910 E Silver Springs Blvd



Ocala, FL 34470

Ship Date: 19JAN10  
ActWgt: 1.0 LB  
CAD: 2627419/NET3010

Delivery Address Bar Code



Ref #  
Invoice #  
PO #  
Dept #

SHIP TO: (850) 921-9586  
**FDEP Receipts**

BILL SENDER

**3800 COMMONWEALTH BLVD # MS-77**

**TALLAHASSEE, FL 32303**

J10100912170124

WED - 20 JAN A2

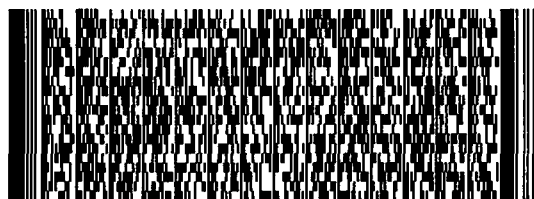
TRK# 7983 1228 2245  
0201

PRIORITY OVERNIGHT

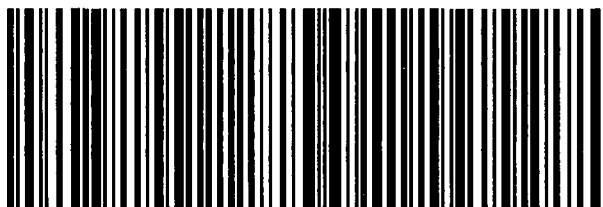
32303

FL-US

TLH



**XH TLHA**



605G168F9GFE8

**After printing this label:**

1. Use the 'Print' button on this page to print your label to your laser or inkjet printer.
2. Fold the printed page along the horizontal line.
3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

**Warning:** Use only the printed original label for shipping. Using a photocopy of this label for shipping purposes is fraudulent and could result in additional billing charges, along with the cancellation of your FedEx account number.

Use of this system constitutes your agreement to the service conditions in the current FedEx Service Guide, available on fedex.com. FedEx will not be responsible for any claim in excess of \$100 per package, whether the result of loss, damage, delay, non-delivery, misdelivery, or misinformation, unless you declare a higher value, pay an additional charge, document your actual loss and file a timely claim. Limitations found in the current FedEx Service Guide apply. Your right to recover from FedEx for any loss, including intrinsic value of the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental, consequential, or special is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss. Maximum for items of extraordinary value is \$500, e.g. jewelry, precious metals, negotiable instruments and other items listed in our Service Guide. Written claims must be filed within strict time limits, see current FedEx Service Guide.

FLORIDA DEPARTMENT OF REVENUE  
2010 JAN 20 PM  
FINANCE & ACCOUNTING

# FedEx® Shipment Receipt

## Address Information

### Ship to:

FDEP Receipts

3800 COMMONWEALTH  
BLVD # MS-77TALLAHASSEE, FL  
32303-3123  
US  
8509219586

### Ship from:

Sara McGovern  
Hiers-Baxley Funeral Services  
910 E Silver Springs BlvdOcala, FL  
34470  
US  
3526297171

## Shipping Information

Tracking number: 798312282245

Ship date: 01/19/2010

Estimated shipping charges: 14.73

## Package Information

Service type: Priority Overnight

Package type: FedEx Envelope

Number of packages: 1

Total weight: 1LBS

Declared value: 0.00USD

Special Services:

Pickup/Drop-off: Drop off package at FedEx location

## Billing Information

Bill transportation to: Sender

Your reference:

P.O. no.:

Invoice no.:

Department no.:

FLORIDA DEPARTMENT OF  
 TREASURY  
 FINANCE & ACCOUNTING  
 2010 JAN 20 PM 3:37

Thank you for shipping online with FedEx ShipManager at [fedex.com](http://fedex.com).

## Please Note

FedEx will not be responsible for any claim in excess of \$100 per package, whether the result of loss, damage, delay, non-delivery, misdelivery, or misinformation, unless you declare a higher value, pay an additional charge, document your actual loss and file a timely claim. Limitations found in the current FedEx Service Guide apply. Your right to recover from FedEx for any loss, including intrinsic value of the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental, consequential, or special is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss. Maximum for items of extraordinary value is \$500, e.g., jewelry, precious metals, negotiable instruments and other items listed in our Service Guide. Written claims must be filed within strict time limits; Consult the applicable FedEx Service Guide for details.

The estimated shipping charge may be different than the actual charges for your shipment. Differences may occur based on actual weight, dimensions, and other factors. Consult the applicable [FedEx Service Guide](#) or the FedEx Rate Sheets for details on how shipping charges are calculated.