HUMAN CREMATORIES AIR GENERAL PERMIT EXAMPLE REGISTRATION WORKSHEET VED

JAN 06 2012

Facility Identification Number - If known (seven digit number)	DIVISION OF AIR
0990649 DAGNAYO -	RESOURCE MANAGEMENT
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 from an air operation permit to an air general permit). If the facility currently permits, such permit(s) must be surrendered by the owner or operator upon the permit. (See "Surrender of Existing Air Operation Permit(s)" below.)	holds one or more air operation the effective date of this air general
Operates an existing facility not currently permitted or using an air general pe	ermit.
RE-REGISTRATION (for facilities currently using an air general permit) - Noti Continue operating the facility after expiration of the current term of air gene Continue operating the facility after a change of ownership.	
Make an equipment change requiring re-registration pursuant to Rule 62-210 Any other change not considered an administrative correction under Rule 62	
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 e permit; specifically permit number(s):	ffective date of this air general
N/A	
General Facility Information	
Facility Owner/Company Name (Name of corporation, agency, or individual owner operates, controls, or supervises the facility.)	who or which owns, leases,
Boynton Memorial Chapel	
Site Name (Name, if any, of the facility site; e.g., Plant A, Metropolis Plant, etc. If complete registration must be submitted for each.)	more than one facility is owned, a
Boynton Crematory	
Facility Location (Physical location of the facility, not necessarily the mailing address	ess.)
Street Address: <u>800</u> W. Boynton Beach Blvd. City: <u>Bo</u> ynton Beach County: <u>Pa</u> lm Beach Zi	p Code: <u>334</u> 26 - 364 /
Facility Start-Up Date (Estimated start-up date of proposed new facility.)(N/A for e	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: Stormet Norem, President
Facility Contact Telephone Numbers
Telephone: <u>561</u> -734-5600 Fax: <u>561</u> -734-5604
Cell phone: <u>561</u> -716-5548
E-mail: <u>boy</u> ntonmemorial@bellsouth.net
Facility Contact Mailing Address Organization/Firm: Boynton Memorial Chapel
Mailing Address:800 W.Boynton Beach Blvd.
City: Boynton Beach County: Palm BeachZip Code: 33426
Other Contact/Representative (to serve as additional Department contact)
Name and Position Title Print Name and Title:Karilyn Hohner, Funeral Director

Other Contact/Representative Telephone Numbers	
Telephone: 561-734-5600	Fax: <u>561</u> -734-5604
Cell phone: <u>561</u> -315-6103	
E-mail: karihohner@bellsouth.net	
Other Contact/Representative Mailing Address	
Organization/Firm: <u>Boy</u> nton Memorial Chapel	•
Mailing Address: 800 W. Boynton Beach Bl	vd.
City: <u>Boyn</u> ton Beach	County: Palm Beach Zip Code: 33426
Government Facility Code (check only one)	
Facility not owned or operated by a federal, state	, or local government.
Facility owned or operated by the federal govern	ment.
Facility owned or operated by the state.	
Facility owned or operated by the county.	
Facility owned or operated by the municipality.Facility owned or operated by a water management	ont district
in Facility owned of operated by a water management	ant district.

Emission Unit Details

MANUFACTURER	MODEL NUMBER	SERIAL NUMBER	RATED CAPACITY
Matthews	PP-2	0170206	150 lbs per hour
	 		

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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.

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Department of Environmental Protection Receipts PO Box 3070 Tallahassee, FL 32315-3070