

## Florida Department of Environmental Protection

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

leff Kottkamp Lt. Governor

Michael W. Sole Secretary

August 22, 2008

Mr. Todd Degusipe, Owner Degusipe Funeral Home 9001 South Highway 17-92 Maitland, Florida 32751

Dear Mr. Degusipe:

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 July 17, 2008. We have assigned ARMS No. <u>1170406-001</u> 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

#### **MEMORANDUM**

TO: Pat Grant

FROM: Dick

<u>DATE</u>: 08/22/08

<u>TIME</u>: 08:30 am

**SUBJECT**: Letter of Acknowledgement

DESCRIPTION: AIRS ID# 1170406-001-AG

Pat,

Mr. Degusipe requests that his Letter of Acknowledgement to be sent to the following address:

Mr. Todd Degusipe 3116 Floral Way East Apopka, Florida 32703

## HUMAN CREMATORY AIR GENERAL PERMIT REGISTRATION FORM

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

Registration Type									
Check one:									
<ul> <li>INITIAL REGISTRATION - Notification of intent to:</li> <li>         ☐ Construct and operate a proposed new facility.     </li> <li>         ☐ 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).     </li> </ul>									
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									
<u>Facility Owner/Company Name</u> (Name of corporation, agency, or individual owner who or which owns, leases, operates, controls, or supervises the facility.) <b>DEGUSIPE FUNERAL HOME</b>									
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.)  DEGUSIPE FUNERAL HOME									
Facility Location (Provide the physical location of the facility, not necessarily the mailing address.)									
Street Address: 9001 SOUTH HIGHWAY 17-92 City: MAITLAND County: SEMINOLE Zip Code: 32751									
Facility Start-Up Date (Estimated start-up date of proposed new facility.) (N/A for existing facility) 9/31/08									

DEP Form No. 62-210.920(2)(c) Effective: January 10, 2007 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: TODD DEGUSIPE, OWNER Owner/Authorized Representative Mailing Address Organization/Firm: **DEGUSIPE FUNERAL HOME** Street Address: 9001 SOUTH HIGHWAY 17-92 City:MAITLAND County: **SEMINOLE** Zip Code: **32751** Owner/Authorized Representative Telephone Numbers Telephone: 407-489-2005 Fax: 407-386-8501 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: SAME AS ABOVE Facility Contact Mailing Address Organization/Firm: Street Address: City: County: Zip Code: Facility Contact Telephone Numbers Fax: Telephone: 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.

Sionature

7/15/2008

DEP Form No. 62-210.920(2)(c) Effective: January 10, 2007

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 description description description of this air correct part of the confirmance of the con								
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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 are equipment at the facility, and identify any air pollution control measures or equipment used.								
This registration is for installation of a new B&L Cremation Systems, Inc. N20 Series , 150 lb/hr human crematory incinerator.								
The new crematory is designed to burn human remains at the average incineration rate of 150 pounds per hour. The incinerator consists of primary and secondary (afterburner) chambers, each fired on natural gas with a maximum total design heat input rate of 1.5 mmbtu/hr (0.5 mmbtu/hr. Primary chamber, 1.0 mmbtu/hr. Secondary chamber).								
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 will adjust the cremation process if excess opacity is measured. Crematory and opacity monitor information is attached.								

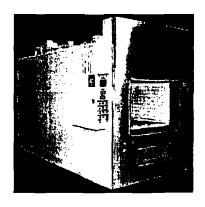
DEP Form No. 62-210.920(2)(c) Effective: January 10, 2007





## **Human Cremation**

Below is the information about our N20 Series cremation retorts.



#### N20 - Specifications

Dimensions: Height 8'-6" Width 5'-6" Length 12'-0"

Weight: 24,000 lbs.

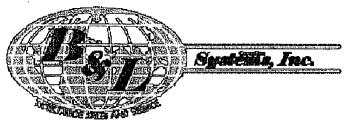
Power Requirments: 220V, 1 Phase, 30 AMPS 110V, 1 Phase, 10 AMPS

Gas Pressure: Natural Gas 7" W.C. Propane Gas 11" W.C.

Cremation Rate: 150 lbs/hour

Burner Output:
Maximum Input Rating 1,500,000 BTU's per hour
Afterburner Maximum 1,000,000 BTU's per hour
(Full Modulation 100%)
Ignition Burner 300,000 BTU's per hour
Cremation Burner 500,000 BTU's per hour

Air Requirements: Outside air inlet louvers in the room located at or below burner height, capable of passing 2,500 CFM of free air.



7205 114<sup>TH</sup> Avenue North • Largo, Florida 33773 1-800-622-5411 • 727-541-4666 • Facsimile 727-547-0669

#### TEMPERATURE CONTROL SEQUENCE

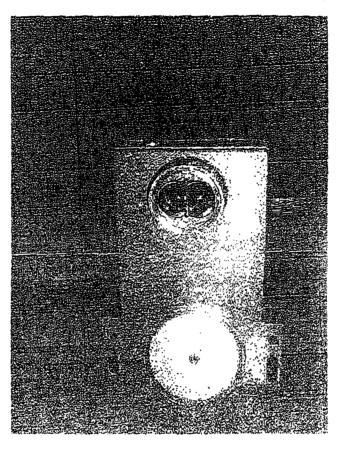
A type "K" thermocouple is placed 19-20 ft<sup>3</sup> downstream of the afterburner flame tip to measure temperature. The downstream distance is determined based on residence time calculations. The temperature signal is sent to the main control panel where it is received by a FUJI PYZ series temperature controller with a digital readout and a Honeywell DR4200 temperature recorder. The temperature controller controls the temperature via a motorized butterfly valve located on the afterburner inlet gas assembly. Gas demand is controlled to maintain a steady temperature. The ignition/cremation burner is interlocked to the afterburner temperature by the temperature controller set point. Combustion cannot start until temperature set point is reached. Alarm contacts in the temperature controller are utilized for over (high) temperature conditions. 100° F over set point the afterburner will be in maximum low fire and the ignition/cremation burner will shut off. The butterfly valve located on the secondary air inlet is controlled by a separate temperature output to add air to cool the system. At set point the unit will return to normal operation. An optimonitor smoke detector is placed on the stack and set at 10% opacity. If emissions occur the alarm will sound, a visual red warning lamp located on the control panel will illuminate and the primary burners will shut off. The excess air butterfly valve will open to add air to the secondary chamber to oxidize the emissions. After a five (5) minute period the unit will revert to normal operations.



### Systems, Inc.

7205 - 114th Avenue North - Eargo, Florida 33773 1-800-672-5411 - 727-541-4566 - Tacsimile 777-547-669 c-mall: bicremsys@aol.com - www.blcremationsystems.com

#### VISTBLE OPACITY MONITOR (VOM-1)



APPLICATION: menitoring control used on retorts to warn operators and shut down processes based on opacity.

IMPROVED RUGGED DESIGN

EASY TO INSTALL AND SUPPORT

UNAFFECTED BY AMBIENT LIGHT

EXTERNAL ADJUSTMENT

SPANS UP TO 6 FEET

VISIBLE LED LIGHT SOURCE

World's Largest Independent Cremation Equipment Manufacturer

#### B&L CREMATION SYSTEMS, INC.

#### GENERAL PURPOSE OPACTTY MONITOR

#### SPECIFICATIONS

LIGHT SOURCE: Pulsed visible LED

SPECTRAL RESPONSE: Between 400nm and 500nm

ANGLE OF VIEW. Less than 4 degrees from axis

AMBIENT LIGHT: No measurable effect

MAXIMUM DISTANCE BETWEEN MONTTOR AND REFLECTOR, 6 Feet

MONITOR TYPE: Retro reflective using a 3" reflector

ADJUSTMENT RANGE: 0 TO 100% opacity

ACCURACY: +/- 3% of full scale

POWER: 24 VAC, less than 10 VA

OUTPUT: Relay, DPDT: 5.0 A @ 102 VAC LED indicator for sensitivity adjustment

TEMPERATURE: Storage, +7 degrees to 32 degrees C Operating: -29 degrees to 66 degrees C

PHYSICAL, 8,000"H x 5.750"W x3.375" D

ENCLOSURF: Meets NEMA 3, 4, and 12 specs

#### OPACITY MONITOR ADJUSTMENT PROCEEDURE (NEW)

The following procedure may be necessary to be performed from time to time due to vibration on the top of the rotort. This procedure is designed to be both simple and quick, and to insure the proper operation of your relort.

It is suggested that before starting, this procedure be carefully read, and if you have any questions, call the service dept, at B&L Cremation Systems. A service technician will be happy to answer any questions or assist you with the alignment / adjustment of your opacity monitor.

The best time to perform this procedure is on a cool report.

Please check the cleanliness of the opacity monitor lons and reflector. Inspect the reflector for any damage, replacing it as necessary.

You will need the following tools.
6" adjustable wrench
7/16" wrench
A Phillips scrowdriver
A small straight slot screwdriver
6' to 8' step ladder

Step 1: Open the electrical cabinot located on your retort. Inside, locate the "CI BLOWER" contactor. At the bottom of the contactor, from left to right, you will see a red "STOP" button. To the right of this is a blue "RESET" button. Above this is a "TEST" slot (see fig. 1).

Step 2: Using a pen, push the test slot to the left until only black is visible. This will disable the main blower, allowing you to adjust the opacity monitor, and hear the internal relay click

Step 3: Furn on the retort with the main timer set to zero. The "Cool Down" is my should be illuminated.

Step 4 Next, it will be necessary to get on top of the retort. Inspect the opacity monitor, locating the red slignment L.E.D. and the sensitivity adjustment (see fig. 2). The red L.E.D. should be lit, and by passing your hand in front of the lens, you should be able to hear the opacity monitor click. If you are experiencing minor missance tripping of the opacity system, turn the sensitivity adjustment CLOCKWISE approximately 1/8 of a turn. This should correct the problem. Now press the round blue "RESET" button located on the "C1 BLOWER" contactor in the electrical cabinet. Your retort is now ready to operate. If, however, the red L.E.D. is not illuminated or you do not hear the clicking when you pass your hand in front of the monitor, proceed to step 5.

Step 5: Turn the sensitivity adjustment FULLY CLOCKWISE. Loosen the two mounting bolts holding the opacity monitor. By slowly moving the opacity monitor (left or right, forward or backward), obtain the maximum brightness possible for the L.E.D. Carefully tighten one of the mounting bolts, using shims as necessary, then stug the remaining bolt. Do NOT tighten this bolt. Turn the sensitivity adjustment COUNTERCLOCKWISE until the monitor clicks. Turn the sensitivity adjustment CLOCKWISE until you hear the monitor click again, then continue CLOCKWISE an additional 1/8 turn: The opacity monitor is now correctly set. Press the round blue "RESET" button on the "Cl BLOWER" contector, completing the sligament procedure. Please note: if the circuit board is black counterclockwise and clockwise are reversed. Counterclockwise will be clockwise and clockwise will be counterclockwise.

If the red L.B.D. does not illuminate, or if the monitor does not click, please contact the service department at B&L Cremation Systems to further assist you.

#### OPACITY MONITOR ADJUSTMENT PROCEEDURE

FIGURE L''CLBLOWER"

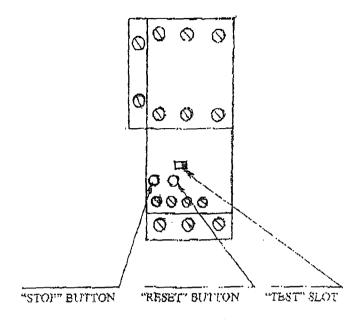
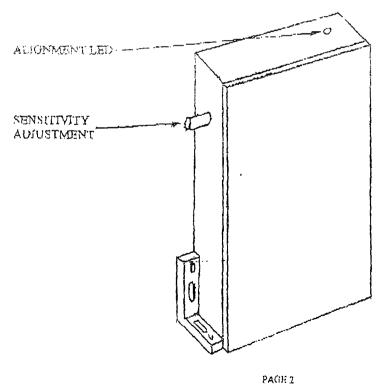


FIGURE 2, OPACITY MONITOR



# CALCULATIONS FOR PRODUCTS OF COMBUSTION AND RESIDENCE TIME FOR B & L CREMATION SYSTEMS N20 SERIES, NATURAL GAS FIRED, 150 LB/HR, TYPE IV WASTE, HUMAN CREMATORY

#### A. BASIS: 1 LB WASTE

- 1. <u>1 lb waste x 1000 Btu/lb waste</u> = 1.5 lbs air 10,000 Btu / 15 lb air
- 2. 1 lb waste x 0.10 lb combustible = 0.10 lbs of combustibles lb waste
- 3. <u>1 lb waste x 0.85 lb H20 x 1.6<sup>(1)</sup></u> = 1.36 lbs of water lb waste
- 4.  $\underline{6500 \text{ Btu aux fuel}^{(2)} \text{ x } 10 \text{ ft}^3 \text{ air/ft}^3 \text{ fuel}}_{1050 \text{ Btu/ft}^3 \text{ fuel }} = 4.64 \text{ lb of air for aux fuel}$
- 5.  $\underline{6500 \text{ Btu aux fuel x 0.044 lb fuel/ft}^3 \text{ fuel}} = 0.27 \text{ lb of aux. fuel}$  $\underline{1050 \text{ Btu/ft}^3 \text{ fuel}}$
- 6. Sum = PRODUCTS OF COMBUSTION (POC) = 7.87 LBS POC PER LB OF WASTE @ 70 °F

#### B. RESIDENCE TIME @ 1800 °F

7.87 lb POC/lb waste x 56.93 ft<sup>3</sup>/lb POC @1800 °F x 150 lb waste/hr 3600 sec/hr

- $= 18.7 \text{ ft}^3/\text{sec } @1800 \text{ }^{\circ}\text{F}$
- = 18.7 ft<sup>3</sup> for 1 second residence time

Thermocouple placement at: 19 ft<sup>3</sup>

Secondary chamber operating temperature ≥ 1600 °F

- (1) Correction multiplier for dry air and water vapor
- (2) Fuel is natural gas

References: Incinerator Institute of America
North American Combustion Handbook



'odd M. DeGusipe :116 Floral Way E. .popka, FL 32703



Florida Department of Envionmental Protection Receipts P.O. Box 3070 Tallahassee, FL 32315-3070

<u> Կինիսի փոնգիկ Պինիսի գուրանականի և Հ</u>

## Florida Department of Environmental Protection Cash Receiving Application (CRA) Cashlisting by Deposit #: 291031 thru 291031 Printed: 7/17/2008 4:11:22 PM - Page 12

Cashlisting:

69764

Cashlist Area:

3755

Description: DIV OF AIR RESOURCES MGMT.

Deposit No:

291031

Date Deposited: 07/17/2008

Contact: E. WALKER

Object 002272		Dep DDN484589 484598	Receipt Number 631400 631409	Pre- Numbered <u>Receipt</u>	Name TODD DEGUSIPE TITAN AMERICA	Check Number 0102 0000243810		Reference Account	Payment Number 891065 891073	Remittance Number 789722 789731	Fund Grant PFTF PFTF
	•				Object Code 002272 Subtotal:		\$200.00				
002278	49576 49576	484591 484592	631402 631403	-	CROSS REMEDIATION INC COOPER AND ASSOCIATES	16004 11645	\$1,000.00 \$200.00		891066 891067	789724 789725	APCTF APCTF
		·			Object Code 002278 Subtotal:		\$1,200.00				
002303	49576	484593	631404		HILLSBOROUGH COUNTY BOCC	03133664	\$600.00		891081	789726	PFTF
					Object Code 002303 Subtotal:		\$600.00				
002304	49576 49576 49576	484593 484593 484593	631404 631404 631404		HILLSBOROUGH COUNTY BOCC HILLSBOROUGH COUNTY BOCC HILLSBOROUGH COUNTY BOCC	03133664 03133664 03133664	\$600.00 \$200.00 \$1,300.00		891084 891079 891085	789726 789726 789726	PFTF PFTF /
					Object Code 002304 Subtotal:		\$2,100.00				
002309	49576 49576 49576	484593 484593 	631404 631404 631404		HILLSBOROUGH COUNTY BOCC HILLSBOROUGH COUNTY BOCC HILLSBOROUGH COUNTY BOCC	03133664 03133664 03133664	\$20.00 \$20.00 \$20.00		891083 891082 891080	789726 789726 789726	PFTF PFTF
					Object Code 002309 Subtotal:		\$60.00				