

**HUMAN CREMATORIES  
AIR GENERAL PERMIT REGISTRATION INFORMATION**

**Facility Identification Number - If known** (seven digit number)

**1310258: This August 2012 re-registration is for two (2) existing human crematory units currently permitted under 1310258-004-AG which expires 09/23/2012.**

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**Registration Type**

**1310258-005**

AUG 27 2012

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.

DIVISION OF AIR  
RESOURCE MANAGEMENT

**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.
- 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 - N/A**

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

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**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.)

**Professional Funeral Services of NW FL LLC**

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.)

**Panhandle Crematory**

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

Street Address: **1474 Highway 83 North**

City: **DeFuniak Springs**

County: **Walton**

Zip Code: **32433**

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

**N/A**

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1310258 – August 2012

**Facility Contact –**

<u>Name and Position Title</u> (Plant manager or person to be contacted regarding day-to-day operations at the facility.) Print Name and Title: <b>Joel David Davis, Owner</b>		
<u>Facility Contact Telephone Numbers</u> Telephone: <b>(850) 951-1822</b> , Fax: <b>(850) 951-2122</b> Cell phone: <b>(850) 307-8590</b> E-mail: <b>joel@daviswatkins.com</b>		
<u>Facility Contact Mailing Address</u> Organization/Firm: <b>Professional Funeral Services of NW FL LLC</b> Mailing Address: <b>Panhandle crematory</b> <b>1474 Highway 83 North</b> City: <b>DeFuniak Springs</b> County: <b>Walton</b> Zip Code: <b>32433</b>		

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

<u>Name and Position Title</u> Print Name and Title: <b>Lynn Robinson, P.E., Permitting Manager</b>		
<u>Other Contact/Representative Telephone Numbers</u> Telephone: <b>(813) 752-5014</b> Fax: <b>(813) 752-2475</b> Cell phone: <b>(813) 957-8804</b> E-mail: <b>lrobinson@sesfla.com</b>		
<u>Other Contact/Representative Mailing Address</u> Organization/Firm: <b>Southern Environmental Sciences, Inc.</b> Mailing Address: <b>1204 North Wheeler Street</b> City: <b>Plant City</b> County: <b>FL</b> Zip Code: <b>33563</b>		

**Government Facility Code (check only one)**

<input checked="" type="checkbox"/> Facility not owned or operated by a federal, state, or local government.
<input type="checkbox"/> Facility owned or operated by the federal government.
<input type="checkbox"/> Facility owned or operated by the state.
<input type="checkbox"/> Facility owned or operated by the county.
<input type="checkbox"/> Facility owned or operated by the municipality.
<input type="checkbox"/> Facility owned or operated by a water management district.

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**1310258 – August 2012**

**Emission Unit Details**

MANUFACTURER	MODEL NUMBER	SERIAL NUMBER	RATED CAPACITY
<b>EU 001:</b>			
<b>B&amp;L Cremation Systems, Inc.</b>	<b>N20AA</b>	<b>713-496-03</b>	<b>150 lb/hr</b>
<b>EU 002:</b>			
<b>B&amp;L Cremation Systems, Inc.</b>	<b>Phoenix II</b>	<b>836-619-05</b>	<b>150 lb/hr</b>

**Design Calculations – N/A**

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).

**Facility Fuel & Controls**

The two (2) human crematory units are designed to burn human remains at the average incineration rate of 150 pounds per hour (lb/hr). The incinerators include primary and secondary (afterburner) chambers, and each may be fired with natural gas or LPG.

Emissions of both units are controlled by the afterburners, which maintain minimum secondary chamber combustion zone temperature of 1600°F prior to and during combustion of material in the primary chamber. The secondary chambers are designed to ensure one-second residence time at a gas temperature of 1800°F, and are each equipped with a continuous temperature monitor and recorder, and a stack opacity monitoring system.

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 ENVIRONMENTAL  
 HEALTH & SAFETY  
 DIVISION

**Joel Davis**

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**From:** "Lynn Robinson" <lrobinson@sesfla.com>  
**To:** <joel@daviswatkins.com>  
**Sent:** Tuesday, August 21, 2012 3:43 PM  
**Attach:** Air GP renewal Form\_Panhandle Crem\_2012.pdf  
**Subject:** Air Permit Renewal Form - Air Permit FDEP ID No. 1310258

Joel,

<<...>>

ATTACHED is the 3-page form *for your "overnight" (e.g. via FedEx) submittal – please send it along with a fee check in the amount of \$100.00 payable to "Fla. Dept. of Env. Protection", to the following physical address with confirmation of delivery to DEP-Tallahassee so that they receive it by 8/24/2012 :*

**Department of Environmental Protection**

**Attn: FDEP Receipts**

**3800 Commonwealth Boulevard, MS-77**

**Tallahassee, Florida 32399**

**Phone: (850) 921-9586**

You no longer have to sign these 5-year renewal Forms, just include the \$100 fee check.

Thank you.

Lynn

**Lynn Robinson, P.E.**  
Permitting Manager  
Southern Environmental Sciences, Inc.  
1204 North Wheeler Street  
Plant City, FL 33563  
813 752 5014 Tel  
Cell 813 957 8804  
813 752 2475 Fax

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