



# HUMAN CREMATORY COMPLIANCE INSPECTION CHECKLIST



**INSPECTION TYPE:** ANNUAL (INS1, INS2) ☒ COMPLAINT/DISCOVERY (CI) ☐  
RE-INSPECTION (FUI) ☐ ARMS COMPLAINT NO: \_\_\_\_\_

<b>FACILITY:</b> SCI Funeral Services of Florida, Inc.		<b>DISTRICT:</b>
<b>DBA/Site Name:</b> <b>Southeastern Crematories</b>		Southwest
<b>ADDRESS:</b> 4945 East Bay Drive Clearwater, FL		<b>CONTACT PHONE:</b> 727-536-0494
<b>ARMS NO:</b> 1030047 003	<b>PERMIT NO:</b> 1030047-005-AG	<b>Expiration Date:</b> 12/1/12 <b>Renewal Date:</b> 11/1/12 <b>Test Date:</b> 6/13/00

**EMISSION UNIT DESCRIPTION:** Human Crematory: IE&E Co., Model 43 Super Power-Pak, South stack; batch load 350 pounds, 1,600 degrees F.

**INSPECTION DATE:** 06/10/09  
**INSPECTION COMPLIANCE STATUS (check ☐ only one box)**  
☒ In Compliance; ☐ Minor Non-Compliance; ☐ Significant Non-Compliance

## PART I: General Review:

1.	Permit File Review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2.	Introduction and Entry <i>Comments:</i> I was met by Jake Moore and given a tour of the facility.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3.	<b>Is the Authorized Representative still <u>Christa Jewell</u>?</b> <i>Comments:</i> Christa Jewell and I had a conversation regarding the definition of the facility contact.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.	<b>Is the facility contact still <u>Susan A. Kelly</u>?</b> <i>Comments:</i> Christa Jewell will change the facility contact to Jacob Moore in a letter that should reach DEM within the next few days, i.e. 06/17/09. See comment 3.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5.	<b>If the answer to 3 or 4 is "No", did the facility provide an administrative update within 30 days?</b> [62-210.310(2)(d), F.A.C.]	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## PART II: TESTING REQUIREMENTS – Rule 62-296. 401(5), F.A.C.

(check ☐ appropriate box(es), if a shaded box is checked, this would indicate noncompliance)

### Compliance Demonstration [62-296.401(5)(h), F.A.C.]

1. ☐ New Facility / ☐ New Process Equipment—  
Did this facility demonstrate initial compliance no later than 30 days after beginning operation?----- ☐ Yes ☐ No

2. ☒ Existing Facilities  
Was an annual visible emissions compliance test conducted on each crematory unit for each calendar year: ---- ☒ Yes ☐ No

### Test Reports

1. Does the submitted visible emission test(s) demonstrate compliance with the 5 percent opacity, six-minute average, except that visible emissions not exceeding 15% opacity shall be allowed for up to six minutes in any one-hour period? [62-296.401(5)(b)1., F.A.C.]----- ☒ Yes ☐ No  
The last visible emission test resulted in an opacity of 0 % for the highest six minute average.

### See Comment # 1.

2. Was the test conducted with the unit operating at a capacity of one (1) adult-sized cadaver? [62-296.401(5)(g)] ☒ Yes ☐ No

3. Was the department notified at least 15 days prior to the test? [62-297.310(4)(a)9. F.A.C.]----- ☒ Yes ☐ No

4. Was the required test report filed with the department as soon as practical, but no later than 45 days after the test was completed? [62-297.310(8)(b) ----- ☒ Yes ☐ No

5. Was the facility visible emissions test(s) conducted according to EPA Method 9? [62-297.401(9)(c), F.A.C.]----- ☒ Yes ☐ No

**PART II: TESTING REQUIREMENTS – Rule 62-296. 401(5), F.A.C.**  
(check ☐ appropriate box(es), if a shaded box is checked, this would indicate noncompliance)

6. Was a visible emissions test(s) conducted by the inspector during this site visit according to EPA Method 9?----- ☐ Yes ☒ No  
a) The visible emission test resulted in an opacity of \_\_\_\_\_% for the highest six minute average.  
b) Did the test indicate the facility is operating in compliance with the opacity standard? ----- ☐ Yes ☒ No
7. Is there any reason to ask for a special test to determine compliance with the PM and CO standards? ----- ☐ Yes ☒ No

**PART III: OPERATING/RECORDKEEPING REQUIREMENTS**  
(check ☐ appropriate box(es), if a shaded box is checked, this would indicate noncompliance)

1. Were there any objectionable odor(s) detected? ----- ☒ Yes ☐ No  
An upwind/downwind survey of the facility was conducted. The observed parameters were:  
Downwind odor level detected- 0; Wind direction - S Upwind odor level detected-0 (1-10)
2. **Continuous Monitoring System** – [62-296.401(5)(i), F.A.C.]
- a) Is a continuous temperature monitoring system installed on each unit to record temperatures in the secondary chamber in accordance with the manufacturer's instructions? ----- ☒ Yes ☐ No
- b) Is the temperature probe properly placed, at least at the distance where the 1.0 second gas residence time at ☒ 1,800<sup>1</sup> ☐ 1,600<sup>2</sup> degrees was determined? ----- ☒ Yes ☐ No
- c) Are the following records kept on file, available for inspection for at least two years following the recording of such measurements, maintenance, reports and records?
- 1) All temperature measurements ----- ☒ Yes ☐ No
- 2) All continuous monitoring systems, monitoring devices, and performance testing measurements; monitoring system all continuous performance evaluations ----- ☒ Yes ☐ No
- 3) All CEMS or monitoring device calibration checks (last performed on 07/12/08) ----- ☒ Yes ☐ No
- 4) Adjustments ----- ☒ Yes ☐ No
- 5) Preventive maintenance performed on systems/devices ----- ☒ Yes ☐ No
- 6) Corrective maintenance performed on systems/devices ----- ☒ Yes ☐ No
- 7) Are the temperature charts properly documented with operator name, operator indication of when cremation in the primary chamber was begun, date, time, and temperature markings ----- ☒ Yes ☐ No
- 8) Are all the above records available for at least 2 years?----- ☒ Yes ☐ No
- 9) Was the crematory unit installed after 2/1/07? If yes go to 10(a) – c)----- ☐ Yes ☒ No
- a) Is the crematory unit equipped and operated with a pollutant monitoring system to automatically control combustion based on continuous in-stack opacity measurement? ----- ☐ Yes ☐ No
- b) Is the system calibrated to restrict combustion in the primary chamber whenever any opacity exceeds 15% opacity? ----- ☐ Yes ☐ No
- c) Has the opacity measurement system been cleaned and checked for proper operation in accordance with the manufacturer's recommended maintenance schedule? ----- ☐ Yes ☐ No
- 1 – Application received on or after 8/30/89; 2 – Application received prior to 8/30/89
3. Was this crematory unit application to construct: [62-296.401(5)(c), F.A.C.] (check only one ☐ box)
- a) ☐ **BEFORE** August 30, 1989? (If this box checked, continue on to #4 and skip #5)
- b) ☒ **ON** or **AFTER** August 30, 1989? (If this box checked, skip #4 and continue on to #5)
4. If the application to construct was **BEFORE** August 30, 1989 is the:
- a) secondary chamber combustion zone providing at least a 1.0 second gas residence time @ **1600°F**? ----- ☐ Yes ☐ No
- b) actual operating temperature of the secondary chamber combustion zone no less than **1400°F** throughout the combustion process in the primary chamber? ----- ☐ Yes ☐ No
- c) cremation in the primary chamber begun after the secondary chamber combustion zone temperature is equal to or greater than **1400°F**? ----- ☐ Yes ☐ No
5. If the application to construct **ON** or **AFTER** August 30, 1989 is the:
- a) volume in the secondary combustion zone sufficient to provide at least a 1.0 second gas residence time @ **1800°F**? ----- ☒ Yes ☐ No
- b) actual operating temperature of the secondary chamber combustion zone no less than **1600°F** throughout the combustion process in the primary chamber? ----- ☒ Yes ☐ No
- c) secondary chamber combustion zone temperature equal to or greater than **1600°F** before the cremation process begins in the primary chamber? ----- ☒ Yes ☐ No

**PART III: OPERATING/RECORDKEEPING REQUIREMENTS**(check ☐ appropriate box(es), if a shaded box is checked, this would indicate noncompliance)

6. Are appropriate cremation containers containing no more than 0.5 % (percent) by weight chlorinated plastics used during the cremation of dead human bodies, as demonstrated by MSD sheet? ----- ☒ Yes ☐ No  
 [62-296.401(5)(d), F.A.C.]
- a) If the answer to question 6 above is YES, is certifying documentation from the manufacturer that they are composed of 0.5% or less by weight chlorinated plastics kept on file at the site for the duration of their use and for at least two years after their use? ----- ☒ Yes ☐ No
- b) Are there any other materials, including biomedical wastes (Rule 62-210.200, FAC) incinerated at this location? ----- ☐ Yes ☒ No

**PART IV: Equipment Maintenance**(check ☐ appropriate box(es), if a shaded box is checked, this would indicate noncompliance)**Equipment Maintenance:** – [62-296.401(5)(e), F.A.C.]

1. Is the crematory unit maintained in accordance with the manufacturer's specifications? ----- ☒ Yes ☐ No
2. Are there maintenance/repair/adjustment records kept onsite for at least 2 years? ----- ☒ Yes ☐ No
3. Is there a written plan onsite which addresses the operating procedures during startup, shutdown and malfunction? ----- ☒ Yes ☐ No
4. Does the crematory allow for a visible check on the flame characteristics?----- ☐ Yes ☒ No  
 If yes go to a) – b)
- a) Was the flame characteristic visually checked at least once during each operating shift?----- ☐ Yes ☐ No
- b) Was the flame adjusted when necessary?----- ☐ Yes ☐ No

**PART V: Special Conditions And Procedures**(check ☐ appropriate box(es), if a shaded box is checked, this would indicate noncompliance)**Administrative Changes:**

1. Were there any change in the name, address, or phone number of the facility or authorized representative not associated with a change in ownership or with a physical relocation of the facility or any emissions units or operations comprising the facility; or any other similar minor administrative change at the facility ----- ☒ Yes ☐ No
2. If yes, did the facility provide written notification within 30 days of the change? [62-210.310(2)(d), F.A.C.] ----- ☐ Yes ☒ No

**See comment 3.****Permit Effective Period** – [62-210.310(3)(a), F.A.C.]

1. Is the general permit for this facility still within the 5 year effective period? ----- ☒ Yes ☐ No
2. Did the facility submit the new re-registration form at least 30 prior to permit expiration? ----- ☐ Yes ☐ No

**New or Modified Process Equipment or Change in Ownership**

- C.. Since the last registration form submittal has there been [62-210.310 (2)(b)2, F.A.C
- a) Installation of any new process equipment? - ----- ☐ Yes ☒ No
- b) Alterations to existing process equipment without replacement? ----- ☐ Yes ☒ No
- c) Replacement of existing equipment with equipment that is substantially different? ----- ☐ Yes ☒ No
- d) A change in ownership? ----- ☐ Yes ☒ No
- If the any of the answers to 1a) – 1d) is **Yes** to any, a new registration form and appropriate fee should have been submitted 30 days prior to the change.----- ☐ Yes ☐ No

**Noncompliance Notice:** - [62-210.310(3)(i), F.A.C.]

1. Did the facility have any instances where they were unable comply with or will be unable to comply with any condition or limitation of the air general permit? ----- ☒ Yes ☐ No
- If the answer is **Yes**, proceed to a) and b).
- a) Did the owner or operator provide immediate notification to the Department? ----- ☐ Yes ☒ No

**See comment # 2.**

b) Did the notification include:

1. A description of and cause of noncompliance? ----- ☒ Yes ☐ No
2. The period of noncompliance, including dates and times; or if not corrected, the anticipated time the noncompliance is expected to continue, and steps being taken to reduce, eliminate, and prevent recurrence of the noncompliance? ----- ☒ Yes ☐ No

**PART VI: Comments**

1) Visual Emission tests were performed on EU 003 and EU 004 on 05/12/09. Copies of these tests were given to me during this inspection (find attached), however, supporting documentation (inspector's VE certification & facility temperature charts) were not supplied. Report answers are based upon verified VE tests performed on 06/13/08.

2) On 10/07/08 @ ~ 4:17 pm the thermocouple failed in EU 003 causing chart temperature readings to fall below 1600 degrees for ~ 8 minutes. The facility did not notify this department of the non-compliance. The cremation was in the last 8 minutes of the cycle and the facility immediately, before starting a new cremation, changed the thermo couple, therefore, no further action will be taken by this department. Jacob Moore was counseled on this point at the time of discovery (06/10/09) and Christa Jewell was notified in a phone conversation on 06/11/09. The facility has demonstrated understanding of this rule, [62-210.310(3)(i), F.A.C.], over the past year, as notifications have been sent to DEM and this is the only failure to notify noted during this investigation.

3) Susan Kelley is no longer the facility contact (she is still employed at SCI). Christa Jewel stated on the telephone today (06/11/09) that she will send DEM a letter changing the facility contact to Jacob Moore, the plant manager.

In late March EU 003 was rebuilt with new fire brick. This was considered maintenance and records were on hand..

**Exit Interview:** On 06/10/09 I counseled Mr. Moore on the importance of notification of non-compliance issues. I also thanked Mr. Moore for the diligence and effort he has put forth in maintaining compliance with the air general permit. All documentation was readily accessible and with the large number of cremations performed at this facility the chart documentations were in excellent shape. On this date, I also counseled Christa Jewel on the section of the permit regarding administrative changes [62-210.310(2)(d), F.A.C.].

On 06/11/09, after reading to Ms. Jewel the definition of facility contact as per DEP form 62-210.920(2)(c), Ms. Jewel decided to install Jacob Moore as the facility contact and will send a letter to DEM by 06/17/09 stating this change.

Chris R. Brodeur

**Inspector's Name**

06/10/09

**Date of Inspection**

**Inspector's Signature**

06/10

**Approximate Date of Next Inspection**

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