



# Florida Department of Environmental Protection

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

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary

November 8, 2007

Mr. David Morton  
Orange County Animal Services  
2769 Conroy Road  
Orlando, Florida 32839

Dear Mr. Morton:

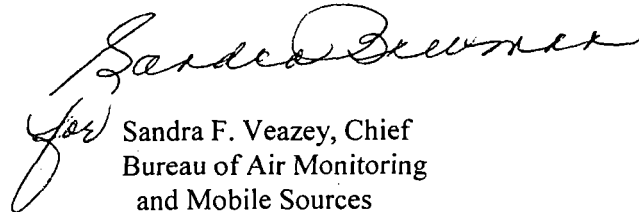
This is to acknowledge that your notification of intent to use the authority of Rule 62-210.310 to operate your facility was received on October 5, 2007. We have assigned ARMS Number 0950192-004 to this facility.

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: Mr. Hamp Pridgen, Orange County

RECEIVED

SEP 26 2007

**ANIMAL CREMATORY  
AIR GENERAL PERMIT REGISTRATION FORM**

DEP Central Dist.

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

**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.

0950192-004 RECEIVED

OCT 09 2007

Bureau of Air Pollution Control  
Source**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.)  
 Orange County Animal Services

**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.)

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

Street Address: 2769 Conroy Road

City: Orlando

County: Orange

Zip Code: 32839

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

N/A

**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:** David Morton, Program Manager, Clinic and Kennel

**Owner/Authorized Representative Mailing Address**

**Organization/Firm:** Orange County Animal Services

**Street Address:** 2769 Conroy Road

**City:** Orlando

**County:** Orange

**Zip Code:** 32839

**Owner/Authorized Representative Telephone Numbers**

**Telephone:** 407-254-9150

**Fax:** 407-355-5748

**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**

**Telephone:**

**Fax:**


**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

  
Date

**Design Calculations**

If this is an initial registration for a proposed new animal 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 animal 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.

Orange County Animal Services operates a Crawford Model C-1000 animal crematory and is requesting to renew their general permit for 5 years. The incinerator is equipped with an afterburner that has an operating temperature of 1600 degrees F in the secondary chamber to control emissions. This facility will notify Grove Scientific & Engineering of any process or equipment changes, and Grove Scientific will ensure the proper notification is provided to the Department.

## VISIBLE EMISSIONS OBSERVATION FORM

Source/Process Information				Observation Readings										
Facility Name <i>Orange County Animal Services</i>				Observation				Start Time <i>10:50</i>		Stop Time <i>11:50</i>				
Source Name <i>Crawford C-1000 Crematory</i>		Permit No. <i>Air General</i>		Sec	0	15	30	45	Min	Sec	0	15	30	45
Location Address <i>2769 Conroy Rd, Orlando FL 32839</i>				1	0	0	0	0	31	0	0	0	0	0
Contact <i>Patsy Baker</i>		Phone No.		2	0	0	0	0	32	0	0	0	0	
Process/Production Rate <i>Cremation of Animal remains in Plastic Bags</i>				3	0	0	0	0	33	0	0	0	0	
Control Equipment <i>Secondary Chamber</i>		Operating Mode <i>&gt;1600°F</i>		4	0	0	0	0	34	0	0	0	0	
Fuel Type/Rate <i>Nat. Gas</i>	Material Type/Rate <i>Type IE 200</i>	Permitted Rate <i>200 lbs/hr</i>		5	0	0	0	0	35	0	0	0	0	
Describe Emission Point <i>Stack from crematory</i>				6	0	0	0	0	36	0	0	0	0	
Height Above Ground Level <i>~22 FT</i>		Height Relative to Observer <i>~22 FT</i>		7	0	0	0	0	37	0	0	0	0	
<b>Emissions Description</b>				8	0	0	0	0	38	0	0	0	0	
Describe Emissions Start <i>Heatwaves</i>		End <i>Heatwaves</i>		9	0	0	0	0	39	0	0	0	0	
Plume Color <i>Colorless</i>		Plume Type <i>Heatwave</i>		10	0	0	0	0	40	0	0	0	0	
Water Droplets Present Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		If yes, is plume Attached <input type="checkbox"/> Detached <input type="checkbox"/>		11	0	0	0	0	41	0	0	0	0	
<b>Meteorological Information</b>				12	0	0	0	0	42	0	0	0	0	
Background Start <i>sky</i> End <i>sky</i>		Background Color Start <i>blue</i> End		13	0	0	0	0	43	0	0	0	0	
Sky Conditions/% Cloud Cover Start <i>clear</i> End		Ambient Temp Start <i>94°F</i> End		14	0	0	0	0	44	0	0	0	0	
Wind Speed Start <i>calm</i> End		Wind Direction Start <i>calm</i> End		15	0	0	0	0	45	0	0	0	0	
<b>Observation Data, Site Diagram</b>				16	0	0	0	0	46	0	0	0	0	
				17	0	0	0	0	47	0	0	0	0	
				18	0	0	0	0	48	0	0	0	0	
				19	0	0	0	0	49	0	0	0	0	
				20	0	0	0	0	50	0	0	0	0	
				21	0	0	0	0	51	0	0	0	0	
				22	0	0	0	0	52	0	0	0	0	
				23	0	0	0	0	53	0	0	0	0	
				24	0	0	0	0	54	0	0	0	0	
				25	0	0	0	0	55	0	0	0	0	
				26	0	0	0	0	56	0	0	0	0	
				27	0	0	0	0	57	0	0	0	0	
				28	0	0	0	0	58	0	0	0	0	
				29	0	0	0	0	59	0	0	0	0	
				30	0	0	0	0	60	0	0	0	0	
<b>Compliance Information</b>				<b>Certification Data, Signatures</b>										
Range of Opacity Readings Min. <i>0</i> Max. <i>0</i>				Observer's Name <i>Bruno A Ferraro</i>										
Average of Highest 24 Consecutive Readings <i>0</i>				Observer's Signature <i>Bruno A Ferraro</i>						Date <i>8-7-07</i>				
Short Term Average Data Averaging Period <i>5</i> minutes Actual Average <i>0</i> %				Organization <i>Grove Scientific &amp; Engineering Company</i>										
Comments <i>No objectionable odors</i>				Certified By <i>FDE/ETA</i>						Date <i>Feb 07</i>				
				I have received a copy of these observations. Signature										
				Date										
				APIS Number										

**Attachment A**  
**Visible Emissions Test Report**

# VISIBLE EMISSIONS EVALUATOR

This is to certify that

*Bruno A. Ferraro*

met the specifications of Federal Reference Method 9 and qualified as a visible emissions evaluator. Maximum deviation on white and black smoke did not exceed 7.5% opacity and no single error exceeding 15% opacity was incurred during the certification test conducted by Eastern Technical Associates of Raleigh, North Carolina. This certificate is valid for six months from date of issue.

347663

Certificate Number

Orlando, Florida

Location

February 7, 2007

Date of Issue

*Thomas Hore*

President

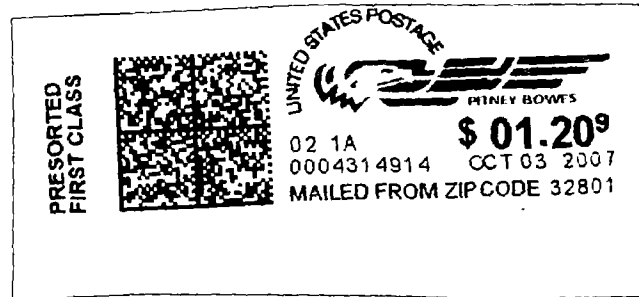
*Michael W. Langford*

Director of Training



ENVIRONMENTAL PROTECTION DIVISION

800 Mercy Drive, Suite 4  
Orlando, Florida 32808



FDEP  
RECEIPTS  
POST OFFICE BOX 3070  
TALLAHASSEE, FLORIDA 32315-3070



**Florida Department of Environmental Protection**  
**Cash Receiving Application (CRA)**  
**Cashlisting by Deposit #: 281200 thru 281200**  
**Printed: 10/5/2007 4:33:49 PM - Page 7**

Cashlisting: **64425**    Cashlist Area: **3755**    Description: **DIV OF AIR RESOURCES MGMT.**  
 Deposit No: **281200**    Date Deposited: **10/05/2007**    Contact: **PATTY ADAMS**

Object	Transmittal	Dep DDN	Receipt Number	Pre-Numbered Receipt	Name	Check Number	Payment Amount	Reference Account	Payment Number	Remittance Number	Fund	
002272	45104	477204	602449		ORANGE COUNTY BOCC	0000616775	\$100.00	<i>10/11/2007</i>	842550	750797	PFTF	
	45104	477205	602450		MACK CONCRETE INDUSTRIES INC	3780	\$100.00		842551	750798	PFTF	
<b>Object Code 002272 Subtotal:</b>							<b>\$200.00</b>					
<b>Cashlisting 64425 Total:</b>							<b>\$200.00</b>					

533127

BOARD OF COUNTY COMMISSIONERS  
ORANGE COUNTY FLORIDA

BANK CODE: 50

RUN ID: 380307

CHECK NO: 00000000616775

DISB CAT: 5B

VENDOR: 12356

DISB CODE: C00000533562

CHECK DATE: 09/25/2007

CD	PURCH. ORDER	INVOICE NUMBER	INV.DT	EVTP	FD-DPT-UNT-SUNT-OBJ-BSA-RSC-RPTG	AMOUNT
	GAXOC-001-000000131731	0950192-003-AG2007	09/20/2	DI01	0001-065-2399- -4040- - - Permit renewal-Certificate #347663	100.00
Page TOTAL :						100.00

For questions relating to this payment call County Finance at (407) 836-5715  
To Report Fraud, Waste, and Abuse of County Assets, call County Audit at (407) 836-5775

TOTAL: 100.00