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This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control No. 2040-0004). Responses to this collection of information are mandatory in accordance with this permit and EPA NPDES regulations 40 CFR 122.41(l)(4)(j). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The public reporting and recordkeeping burden for this collection of information are estimated to average 2 hours per outfall. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates and any suggested methods for minimizing respondent burden to the Regulatory Support Division Director, U.S. Environmental Protection Agency (2821T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

Permit		Permit #: INP000074		Permittee: LAU INDUSTRIES		Facility: LAU INDUSTRIES INC	
Major: No		Permittee Address: 510 SR 25 N ROCHESTER, IN 46975		Facility Location: 510 SR 25 N (RUSKIN COMPANY) ROCHESTER, IN 46975			
Permitted Feature: 001 External Outfall		Discharge: 001-A E-COATING (PRE CLEANING) PROCESS					
Report Dates & Status							
Monitoring Period: From 04/01/24 to 04/30/24		DMR Due Date: 05/28/24		Status: NetDMR Validated			
Considerations for Form Completion							
PRETREATMENT FULTON COUNTY							
Principal Executive Officer							
First Name:		Title:		Telephone:			
Last Name:							
No Data Indicator (NODI)							
Form NODI: --							

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading					Quality or Concentration					# of Ex.	Frequency of Analysis	Sample Type		
					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3				Value 3	Units
00400	pH	1 - Effluent Gross	0	--	Sample					=	7.7			=	8.1	12 - SU		01/01 - Daily	GR - GRAB
					Permit Req.					>=	5.5 DAILY MN			<=	10.5 DAILY MX	12 - SU		01/01 - Daily	GR - GRAB
					Value NODI														
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0	--	Sample	=	0.00996166	=	0.0183375	03 - MGD								01/01 - Daily	TM - TOTALZ
					Permit Req.		Req Mon MO AVG		Req Mon DAILY MX	03 - MGD								01/01 - Daily	TM - TOTALZ
					Value NODI														

Submission Note
If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors
No errors.

Comments

Attachments

Name	Type	Size
INP000074_001A_MMR_2024_04.pdf	pdf	363071.0

Report Last Saved By
LAU INDUSTRIES

User: erick.finn@jci.com
Name: Erick Flinn
E-Mail: efinn@laufan.com
Date/Time: 2024-05-01 08:52 (Time Zone: -04:00)

Report Last Signed By

User: erick.finn@jci.com
Name: Erick Flinn
E-Mail: efinn@laufan.com
Date/Time: 2024-05-01 08:54 (Time Zone: -04:00)





MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

State Form 30530 (R4 / 7-19)

FACILITY NAME AND ADDRESS:

PLEASE COMPLETE ONE COPY FOR EACH MONTH PER OUTFALL. ONCE COMPLETED, THIS FORM SHOULD BE CONVERTED TO A PDF DOCUMENT, NAMED APPROPRIATELY (PERMITID_OUTFALLID_MMR_YYYY_MM.pdf, i.e., IN0012345_001A_MMR_2019_01.pdf), AND ATTACHED TO THE CORRESPONDING NETDMR FORM FOR SUBMITTAL.

E-mail address:

I N PERMIT NUMBER

OUTFALL NO.

0 4 2 4 MO. YR.

No Discharge

** < column: Can enter "<" if measurement value is less than limit of detection

This is a revised submittal.

EFFLUENT CHARACTERISTICS		FLOW	pH	Oil & Grease		Phosphorus		Cadmium		
EFFLUENT PARAMETER NUMBER		Q50050	C00400	Q	C	Q	C	Q	C	
SAMPLE TYPE	Permit Condition	24 Hr. Total	Grab	Grab		24 Hr. Comp.		24 Hr. Comp.		
	Monitored									
FREQUENCY	Permit Condition	Daily	Daily	1 X Month		1 X Quarter		1 X Quarter		
	Monitored									
EFFLUENT LIMITATIONS	Permit Minimum		5.5							
	Permit Average	Report		Report		Report		0.07		
	Permit Maximum	Report	10.5	Report		Report		0.11		
UNITS =		MGD	HI	LOW	LB/DAY	**	MG/L	LB/DAY	**	MG/L
Mon	1	0.0183375	7.8							
Tue	2	0.0136384	7.7							
Wed	3	0.012723	7.7							
Thu	4	0.01177	7.8							
Fri	5	0.0137558	8							
Sat	6	0.009513								
Sun	7	0.002255								
Mon	8	0.01244744	7.8							
Tue	9	0.01256884								
Wed	10	0.0116503	7.9							
Thu	11	0.0109295	8							
Fri	12	0.0119009	7.8							
Sat	13	0.003045								
Sun	14	0.00236748								
Mon	15	0.0106192	7.7							
Tue	16	0.0108869	8.1							
Wed	17	0.012584								
Thu	18	0.01063789	7.8							
Fri	19	0.01205022								
Sat	20	0.00038123								
Sun	21	0.0006424								
Mon	22	0.01236049	7.8							
Tue	23	0.00893141	7.8							
Wed	24	0.0119957	7.9							
Thu	25	0.0116371	7.9							
Fri	26	0.01754729								
Sat	27	0.0067288								
Sun	28	0.00023476								
Mon	29	0.01228515	7.8							
Tue	30	0.01242541	8							
MONTHLY AVERAGE		0.00998166								
HIGHEST VALUE		0.0183375	8.1							
LOWEST VALUE		0.00023476	7.7							
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED										
TOTAL FLOW		0.2988499								

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Prepared by or under the direction of (Certified Operator): **James Erick Flinn** Date (month, day, year) **5/1/2024**

Preparer's telephone number **574-224-5224** Operator's certification number **DS110053**

Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement) **Richard Hisey** Date (month, day, year) **5/1/2024**



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 AND ATTACHED TO THE CORRESPONDING NET DMR FORM
 FOR SUBMITTAL.

I	N	0	0	0	0	0	0	0	0
PERMIT NUMBER									

OUTFALL NO.			

0	4	2	4
MO.		YR.	

No Discharge

** < column: Can enter "<" if measurement value is less than limit of detection

This is a revised submittal.

EFFLUENT CHARACTERISTICS		Total Chromium		Copper		Lead		Nickel	
EFFLUENT PARAMETER NUMBER		Q	C	Q	C	Q	C	Q	C
SAMPLE TYPE	Permit Condition	24 Hr. Comp.		24 Hr. Comp.		24 Hr. Comp.		24 Hr. Comp.	
	Monitored								
FREQUENCY	Permit Condition	1 X Quarter		1 X Quarter		1 X Quarter		1 X Quarter	
	Monitored								
EFFLUENT LIMITATIONS	Permit Minimum								
	Permit Average		1.71		2.0		0.43		2.0
	Permit Maximum		2.0		2.0		0.69		2.0
UNITS=		LB/DAY	** MG/L	LB/DAY	** MG/L	LB/DAY	** MG/L	LB/DAY	** MG/L
Mon	1								
Tue	2								
Wed	3								
Thu	4								
Fri	5								
Sat	6								
Sun	7								
Mon	8								
Tue	9								
Wed	10								
Thu	11								
Fri	12								
Sat	13								
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Sat	20								
Sun	21								
Mon	22								
Tue	23								
Wed	24								
Thu	25								
Fri	26								
Sat	27								
Sun	28								
Mon	29								
Tue	30								
MONTHLY AVERAGE									
HIGHEST VALUE									
LOWEST VALUE									
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED									

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Prepared by or under the direction of (Certified Operator): James Erick Flinn	Date (month, day, year) 5/1/2024	
	Preparer's telephone number 574-224-5224	Operator's certification number DS110053	
	Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement) Richard Hisey	Date (month, day, year)	



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I	N	0	0	0	0	0	0	0	0
PERMIT NUMBER									

OUTFALL NO.			

0	4	2	4
MO.		YR.	

** < column: Can enter "<" if measurement value is less than limit of detection

No Discharge This is a revised submittal.

EFFLUENT CHARACTERISTICS		Silver		Zinc		Total Cyanide			
EFFLUENT PARAMETER NUMBER		Q	C	Q	C	Q	C	Q	C
SAMPLE TYPE	Permit Condition	24 Hr. Comp.		24 Hr. Comp.		24 Hr. Comp.			
	Monitored								
FREQUENCY	Permit Condition	1 X Quarter		1 X Quarter		1 X Quarter			
	Monitored								
EFFLUENT LIMITATIONS	Permit Minimum								
	Permit Average		0.24		1.48		0.65		
	Permit Maximum		0.43		2.61		1.00		
UNITS=		LB/DAY	** MG/L	LB/DAY	** MG/L	LB/DAY	** MG/L	LB/DAY	** MG/L
Mon	1								
Tue	2								
Wed	3								
Thu	4								
Fri	5								
Sat	6								
Sun	7								
Mon	8								
Tue	9								
Wed	10								
Thu	11								
Fri	12								
Sat	13								
Sun	14								
Mon	15								
Tue	16								
Wed	17								
Thu	18								
Fri	19								
Sat	20								
Sun	21								
Mon	22								
Tue	23								
Wed	24								
Thu	25								
Fri	26								
Sat	27								
Sun	28								
Mon	29								
Tue	30								
MONTHLY AVERAGE									
HIGHEST VALUE									
LOWEST VALUE									
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED									

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	James Erick Flinn		5/1/2024
	Preparer's telephone number	Operator's certification number	
	574-224-5224	DS110053	
Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement)			Date (month, day, year)
Richard Hisey			