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Permit

Permit #:
Major:

INP000262
No

Permittee:
Permittee Address:

TOA WINCHESTER, LLC
200 INKS DR
WINCHESTER, IN 47394

Facility:
Facility Location:

TOA WINCHESTER LLC
200 INKS DR
WINCHESTER, IN 47394

Permitted Feature:

001
External Outfall

Discharge:

001-A
STAMPING/WELDING METAL TO AUTO PARTS - TO WINCHESTER POTW

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

REPORT SEMIANNUAL MEASUREMENTS ON THE 001-AS DMR FORM S. PRETREATMENT RANDOLPH COUNTY

Principal Executive Officer

First Name:
Last Name:

Mikio
Yoshida

Title:

President

Telephone:

765-584-7639

No Data Indicator (NODI)

FormNODI: --

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration							# of Ex.	Frequency of Analysis	Sample Type	
Code	Name					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						=	6.93			=	8.52	12 - SU	0	01/01 - Daily	GR - GRAB	
					Permit Req.						>=	5.5 DAILY MN			<=	9.5 DAILY MX	12 - SU		01/01 - Daily	GR - GRAB	
					Value NODI																
01074	Nickel, total recoverable	1 - Effluent Gross	0	--	Sample									=	0.152	=	0.178	19 - mg/L	0	02/30 - Twice Per Month	24 - COMP24
					Permit Req.								<=	2.0 MO AVG	<=	2.0 DAILY MX	19 - mg/L	02/30 - Twice Per Month	24 - COMP24		
					Value NODI																
01079	Silver total recoverable	1 - Effluent Gross	0	--	Sample								<	0.01	<	0.01	19 - mg/L	0	02/30 - Twice Per Month	24 - COMP24	
					Permit Req.								<=	0.24 MO AVG	<=	0.43 DAILY MX	19 - mg/L		02/30 - Twice Per Month	24 - COMP24	
					Value NODI																
01094	Zinc, total recoverable	1 - Effluent Gross	0	--	Sample									=	0.318	=	0.397	19 - mg/L	0	02/30 - Twice Per Month	24 - COMP24
					Permit Req.								<=	1.48 MO AVG	<=	2.61 DAILY MX	19 - mg/L	02/30 - Twice Per Month	24 - COMP24		
					Value NODI																
01113	Cadmium, total recoverable	1 - Effluent Gross	0	--	Sample								<	0.005	<	0.005	19 - mg/L	0	02/30 - Twice Per Month	24 - COMP24	
					Permit Req.								<=	0.07 MO AVG	<=	0.11 DAILY MX	19 - mg/L		02/30 - Twice Per Month	24 - COMP24	
					Value NODI																
01114	Lead, total recoverable	1 - Effluent Gross	0	--	Sample								<	0.05	<	0.05	19 - mg/L	0	02/30 - Twice Per Month	24 - COMP24	
					Permit Req.								<=	0.43 MO AVG	<=	0.69 DAILY MX	19 - mg/L		02/30 - Twice Per Month	24 - COMP24	
					Value NODI																
01118	Chromium, total recoverable	1 - Effluent Gross	0	--	Sample								<	0.02	<	0.02	19 - mg/L	0	02/30 - Twice Per Month	24 - COMP24	
					Permit Req.								<=	1.71 MO AVG	<=	2.0 DAILY MX	19 - mg/L		02/30 - Twice Per Month	24 - COMP24	
					Value NODI																
01119	Copper, total recoverable	1 - Effluent Gross	0	--	Sample									=	0.062	=	0.063	19 - mg/L	0	02/30 - Twice Per Month	24 - COMP24
					Permit Req.								<=	2.0 MO AVG	<=	2.0 DAILY MX	19 - mg/L	02/30 - Twice Per Month	24 - COMP24		
					Value NODI																
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0	--	Sample	=	0.00426019	=	0.00883	03 - MGD								0	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
INP000262_001A_MMR_2024_4.pdf	pdf	272949.0

Report Last Saved By

TOA WINCHESTER, LLC

User: ANDERSJA

Name: James Anderson

E-Mail: janderson@toawinchester.com

Date/Time: 2024-05-04 12:21 (Time Zone: -04:00)

Report Last Signed By

User: ANDERSJA

Name: James Anderson

E-Mail: janderson@toawinchester.com

Date/Time: 2024-05-04 12:22 (Time Zone: -04:00)



MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

State Form 30530 (R 7 / 3-24)

FACILITY NAME AND ADDRESS:

TOA WINCHESTER, LLC.
200 Inks Drive
Winchester, IN. 47394

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	P	0	0	0	2	6	2
PERMIT NUMBER								

0	0	0	1
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	Cadmium		Total Chromium		Copper					
EFFLUENT PARAMETER NUMBER		Q50050	C00400	Q	C	Q	C	Q	C				
SAMPLE TYPE	Permit Condition	Totalizer											
	Monitored	Totalizer											
FREQUENCY	Permit Condition	7/7	7/7										
	Monitored	7/7	7/7										
EFFLUENT LIMITATIONS	Permit Minimum	N/A	5.5		0.01		0.02		0.02				
	Permit Average	N/A	9.5		0.06		1.71		2.00				
	Permit Maximum	N/A			0.11		2.00		2.00				
UNITS =		MGD	HI	LOW	LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L
	Mon	1	0.00731	8.14	6.94								
	Tue	2	0.005933	8.26	7.55	0.00024755	<	0.005	0.00099022	<	0.02	0.00311919	0.063
	Wed	3	0.006522	8.36	7.81	0.00027213	<	0.005	0.00108852	<	0.02	0.00331999	0.061
	Thu	4	0.005365	8.27	7.55								
	Fri	5	0.005515	8.21	7.54								
	Sat	6	0.002815	8.36	7.65								
	Sun	7	0	7.93	7.55								
	Mon	8	0.002083	7.98	7.4								
	Tue	9	0.003467	8.1	7.49								
	Wed	10	0.005831	8.12	7.56								
	Thu	11	0.00619	8.13	7.49								
	Fri	12	0.002539	8.1	7.52								
	Sat	13	0	7.53	7.29								
	Sun	14	0.001711	8.21	7.01								
	Mon	15	0.006552	8.15	7.12								
	Tue	16	0.003686	8.18	7.55								
	Wed	17	0.004308	8.34	7.57								
	Thu	18	0.006367	8.04	7.25								
	Fri	19	0.007154	8.14	7.21								
	Sat	20	0.002415	8.07	7.37								
	Sun	21	0.002251	7.92	7.19								
	Mon	22	0.004884	8.09	7.23								
	Tue	23	0.006192	8.27	7.75								
	Wed	24	0.005059	8.21	7.47								
	Thu	25	0.006176	8.33	7.46								
	Fri	26	0.0002696	8.52	7.76								
	Sat	27	0	7.78	7.55								
	Sun	28	0.000107	8.15	6.93								
	Mon	29	0.00883	8.42	7.54								
	Tue	30	0.008274	8.41	7.72								
MONTHLY AVERAGE		0.00426019			0.00025984		0.005	0.00103937		0.02	0.00321959		0.062
HIGHEST VALUE		0.00883		8.52	0.00027213		0.005	0.00108852		0.02	0.00331999		0.063
LOWEST VALUE		0		6.93	0.00024755		0.005	0.00099022		0.02	0.00311919		0.061
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED													
TOTAL FLOW		0.1278056	Prepared by or under the direction of (Certified Operator):										
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.		John Doolin							Date (month, day, year) 5/4/2024				
		Preparer's telephone number 765-584-7639							Operator's certification number WWW020545				
		Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement) James Anderson							Date (month, day, year) 5/4/2024				



MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

State Form 30530 (R7 / 3-24)

FACILITY NAME AND ADDRESS

TOA WINCHESTER, LLC.
200 Inks Drive
Winchester, IN. 47394

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.

I	N	P	0	0	0	2	6	2
PERMIT NUMBER								

0	0	0	1
OUTFALL NO.			

0	4	2	4
MO.		YR.	

No Dis charge

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

This is a revised submittal.

EFFLUENT CHARACTERISTICS		Lead			Nickel			Silver			Zinc		
EFFLUENT PARAMETER NUMBER		Q	C		Q	C		Q	C		Q	C	
SAMPLE TYPE	Permit Condition												
	Monitored												
FREQUENCY	Permit Condition												
	Monitored												
EFFLUENT LIMITATIONS	Permit Minimum		0.05			0.05			0.01			0.02	
	Permit Average		0.43			2.00			0.24			1.48	
	Permit Maximum		0.69			2.00			0.43			2.61	
UNITS=		LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L
	Mon 1												
	Tue 2	0.00247554	<	0.05	0.00871392		0.176	0.00049511	<	0.01	0.01965582		0.397
	Wed 3	0.0027213	<	0.05	0.00896654		0.128	0.00054426	<	0.01	0.01300784		0.239
	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		0.00259842		0.05	0.00784023		0.152	0.00051968		0.01	0.01633183		0.318
HIGHEST VALUE		0.0027213		0.05	0.00871392		0.176	0.00054426		0.01	0.01965582		0.397
LOWEST VALUE		0.00247554		0.05	0.00896654		0.128	0.00049511		0.01	0.01300784		0.239
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):

John Doolin

Date (month, day, year)

5/4/2024

Preparer's telephone number

765-584-7639

Operator's certification number

WW020545

Signature of principal executive officer or authorized agent
(or attested by NetDMR subscriber agreement)

James Anderson

Date (month, day, year)

5/4/2024