



Indiana Department of Environmental Management

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Eric J. Holcomb
Governor

Brian Rockensuess
Commissioner

July 02, 2024

Via Email to: michael.harding@heidelbergmaterials.com

Mr. Michael Harding, Environmental Manager
Heidelberg Materials US Cement LLC
200 Mill Creek Road
Mitchell, Indiana 47446

Dear Mr. Harding:

Re: Inspection Summary/ Noncompliance Letter
Heidelberg Materials US Cement LLC
NPDES Permit No. IN0001775
Mitchell, Lawrence County

An inspection of the above-referenced facility or location was conducted by a representative of the Indiana Department of Environmental Management, Southeast Regional Office, pursuant to IC 13-18-3-9. A summary of the inspection is provided below:

Date(s) of Inspection: June 25, 2024
Type of Inspection: Compliance Evaluation Inspection
Inspection Results: Violations were observed.

The following concerns were noted:

1. Operations was rated marginal due to excessive solids prior to Outfall 007 (see Attached Photos). The facility needs to improve the solids handling procedures to ensure that all facilities for treatment be maintained in good working order and efficiently operated at all times. At the time of the inspection, there were three dewatering bags prior to Outfall 007 and only one dewatering bag was being utilized. The other two dewatering bags were full of solids and beneath the bag that was actively dewatering.
2. Maintenance was rated as marginal due to the facility lacking an adequate record of repair history. Records for general maintenance performed throughout the facility must be improved.
3. The Self Monitoring Program was rated as marginal. The following deficiencies were noted:
 - A. It appears that some potential sampling events may have been missed or not analyzed. In August of 2023, it was noted on the Discharge Monitoring Reports (DMRs) that eight samples were not

able to be analyzed due to laboratory errors. Inspector recommends that the facility should attempt to sample during the first rain event that meets the sampling criteria to avoid missing samples in the future.

- B. It was determined that the final sample location for Outfall 003 was not representative of the volume and nature of the discharge. The facility was collecting final effluent samples in the sedimentation pond at the top of the pond. The discharge point is at the bottom of pond and this is not a representative sample location due to settling.

- 4. The Records/Reports evaluation generated a marginal rating. The requested records were available and appeared to be mostly complete and accurate. However, the following deficiencies were noted:

- A. In September 2023, it was determined for Outfall 001S that the Lead result was not recorded on the Monthly Monitoring Report (MMR) or Discharge Monitoring Report (DMR). Contract laboratory reports were reviewed during the inspection and it was noted that sampling and analysis was conducted for Lead at Outfall 001S. **The facility must correct and resubmit this report in NetDMR.**

- B. The number of exceedances (No. Ex.) column in NetDMR is not being filled out accurately.

- 5. The Effluent Limits Compliance area was rated unsatisfactory due to the following self-reported violations of the limits detailed in Part I. A. of the the NPDES Permit:

Month	Year	Outfall	Parameter	Number
May	2023	001A	Oil & Grease	1
June	2023	003AQ	TSS	1
June	2023	007A	TSS	1
July	2023	003AQ	TSS	1
July	2023	007A	TSS	1
September	2023	003AQ	TSS	1
September	2023	004AQ	TSS	1
February	2024	007A	TSS	1
April	2024	007A	TSS	1

There was a compliance status review conducted for the period of January 2023 through July 2023 and a noncompliance letter was issued on November 21, 2023. The facility adequately responded to the noncompliance letter on December 20, 2023. *The facility does **not** need to respond to the effluent limits violations noted from May 2023 to July 2023.*

Within 30 days of receipt of this letter, a written detailed response documenting correction of the concerns listed above and/or a plan for assuring future compliance must be submitted to this office. Failure to respond adequately to this letter may result in formal enforcement action. Please direct your response to this letter to our letterhead address or via email to wwViolationResponse@idem.IN.gov. Any questions should be directed to Christina Sandlin at 812-216-5646 or by email to csandlin@idem.IN.gov.

Thank you for your attention to this matter.

Sincerely,

A handwritten signature in cursive script that reads "Mark A. Amick". The signature is written in black ink and is positioned above the printed name.

Mark A. Amick, Director
Southeast Regional Office

Enclosure

Outfall #	Insp. Date	Outfall Inspection Comments
001	6/25/2024	The effluent was clear and free of color.
002	6/25/2024	The effluent was clear and free of color.
003	6/25/2024	The effluent was clear and free of color.
005	6/25/2024	The effluent was clear and free of color.
007	6/25/2024	The effluent was clear and free of color.

Comments:

The outfalls 001, 002, 003, 005, and 007 generated a satisfactory rating. The outfalls 004, 006, and 008 were not evaluated since there was no discharge at the time of the inspection.

Permit:

- S 1. Did the facility have a copy of the current permit available for reference.
- N 2. If the permit expires within 180 days, has a renewal application been submitted?
- S 3. Receiving waters are accurately described in the permit.
- N 4. The permit has been properly transferred if there is a new owner.
- N 5. The NPDES Permit Schedule of Compliance monitoring and reporting milestones have been met.

Comments:

The facility has a valid permit. There is no Schedule of Compliance in the current NPDES permit.

Facility/Site:

- N 1. The facility was found to have standby power or equivalent provision, If required.
- N 2. An adequate alarm or notification system for power or equipment failure was available for the treatment facility.
- S 3. Safe and adequate access was provided for inspection of all treatment units and outfalls.
- S 4. Facilities and equipment did not appear beyond their useful life.
- 5. List any safety concerns noted during the inspection in the box below:

Comments:

The facility grounds are well maintained.

Operation:

- M 1. All facilities and systems necessary for achieving compliance with the terms and conditions of the permit were operated efficiently, including an anticipated bypass report for steps of treatment taken out of service.
- S 2. An adequate, qualified operating staff was found to be provided to carry out the operation of the facility, including:
 - a. Certified Operator's on-site attendance and/or qualified operations personnel attendance was adequate.
 - b. Adequate documentation of operational activities, including system monitoring and cleaning.
 - c. Adequate funding to ensure proper operation.
- M 3. Solids handling procedures were adequate.
- N 4. Documentation of solids removal, handling, and disposal was adequate.

Comments:

Operations was rated as marginal due to excessive solids prior to Outfall 007 (see Attached Photographs). The facility needs to improve the solids handling procedures to ensure that all facilities for treatment be maintained in good working order and efficiently operated at all times. At the time of the inspection, there were three dewatering bags prior to Outfall 007 and only one dewatering bag was being utilized. The other two dewatering bags were full of solids and beneath the bag that was actively dewatering.

Maintenance:

- M 1. A maintenance record system has been established and includes maintenance/repair history and preventative maintenance plan.
- M 2. Facility maintenance activities appeared adequate.

Comments:

Maintenance was rated as marginal due to the facility lacking an adequate record of repair history. Records for general maintenance performed throughout the facility must be improved.

Sludge:

- N 1. Sludges, screenings, and slurries were found to be handled and disposed of properly.

Comments:

The facility has not disposed of solids during the review period.

Self-Monitoring:

- M 1. Samples were found to be taken at pre-designated locations and were found to be representative.
- N 2. Flow-proportioned samples were found to be obtained where needed.

- M 3. The facility was found to conduct sampling of all waste streams, including type and frequency, as required in the permit.
- S 4. Sample collection procedures, including automatic sampling, include:
 - a. Samples refrigerated during compositing.
 - b. Proper preservation techniques used.
 - c. Containers and holding times conform to 40 CFR 136.3.
- S 5. Sample documentation was adequate and includes:
 - a. Dates, times, and locations of sampling.
 - b. Name of individual performing sampling.
 - c. Instantaneous flow for flow-weighted aliquots.
 - d. Chain of Custody records.
- N 6. NPDES Permit Total Toxic Organic (TTO) requirements were being met.
- N 7. NPDES Permit Whole Effluent Toxicity (WET) testing requirements were being met.

Comments:

The Self Monitoring Program was rated as marginal. The following deficiencies were noted:

- A. It appears that some potential sampling events may have been missed or not analyzed. In August of 2023, it was noted on the Discharge Monitoring Reports (DMRs) that eight samples were not able to be analyzed due to laboratory errors. Inspector recommends that the facility should attempt to sample on the first rain event that meets the sampling criteria to avoid missing samples in the future.
- B. It was determined that the final sample location for Outfall 003 was not representative of the volume and nature of the discharge. The facility was collecting final effluent samples in the sedimentation pond at the top of the pond. The discharge point is at the bottom of pond and this is not a representative sample location due to settling.

Flow Measurement:

- S 1. Flow was found to be properly monitored as required by the permit.
- S 2. Flow data and calibration records were available for review, and document that monitoring equipment has been calibrated at the frequency required in the permit.

Comments:

The flow at Outfall 007 is monitored by a flow meter. The flow at all other outfalls is estimated based on rain events and water pumped.

Laboratory:

The following laboratory records were reviewed:

pH Bench Sheets Contract Lab Reports Chain-of-Custody

- S 1. The laboratory practices and protocol reviewed were adequate, including:
 - a. A written laboratory QA/QC manual was available.
 - b. Samples were found to be properly stored.
 - c. Approved analytical methods were used.
 - d. Calibration and maintenance of instruments was adequate.
 - e. QA/QC procedures were adequate.
 - f. Dates of analyses (and times, where required) were recorded.
 - g. Name of person performing analyses was recorded.
- S 2. Review of lab records and/or on-site field testing equipment and protocols was found to be adequate.

Contract Lab Information

Pace Analytical	Indianapolis, IN
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Comments:

The pH bench sheet and calibration data appeared to be accurate and complete. All other samples are sent to Pace Analytical for analysis.

Records/Reports:

The following records/reports were reviewed:

DMRs for the period of May 2023 to April 2024 were reviewed as part of the inspection.

- S 1. All facility records for the period including the previous three years were available for review.
- M 2. DMRs and MMRs were completed properly and accurately including:
 - a. "No Ex" column was accurate.

- b. Signatory requirements were met.
- c. Reports were prepared by or under the direction of a certified operator.

N 3. Bypass and Noncompliance reporting are adequate.

Comments:

The Records/Reports evaluation generated a marginal rating. The requested records were available and appeared to be mostly complete and accurate. However, the following deficiencies were noted:

- A. In September 2023, it was determined for Outfall 001S that the Lead result was not recorded on the Monthly Monitoring Report (MMR) or Discharge Monitoring Report (DMR). Contract laboratory reports were reviewed during the inspection and it was noted that sampling and analysis was conducted for Lead at Outfall 001S. **The facility must correct and resubmit this report in NetDMR.**
- B. The number of exceedances (No. Ex.) column in NetDMR is not being filled out accurately.

Enforcement:

N 1. Agreed Order compliance milestones have been met.

Comments:

There was no Agreed Order at the time of the inspection.

Effluent Limits Compliance:

Yes 1. Were DMRs reviewed as part of the inspection?

DMRs for the period of May 2023 to April 2024 were reviewed as part of the inspection.

Yes 2. Were violations noted during the review of DMRs?

The Effluent Limits Compliance area was rated unsatisfactory due to the following self-reported violations of the limits detailed in Part I. A. of the NPDES Permit:

Month	Year	Outfall	Parameter	Number
May	2023	001A	Oil & Grease	1
June	2023	003AQ	TSS	1
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September	2023	003AQ	TSS	1
September	2023	004AQ	TSS	1
February	2024	007A	TSS	1
April	2024	007A	TSS	1

Comments:

There was a compliance status review conducted for the period of January 2023 through July 2023 and a noncompliance letter was issued on November 21, 2023. The facility adequately responded to the noncompliance letter on December 20, 2023. The facility does **not** need to respond to the effluent limits violations noted from May 2023 to July 2023.

Other:

SWPPP

Comments:

The facility has a current SWPPP and adequately conducts and documents required quarterly and annual self-inspections.

IDEM REPRESENTATIVE

Inspector Name:	Email:	Phone Number:
Christina Sandlin	csandlin@idem.IN.gov	812-216-5646

IDEM MANAGER REVIEW

IDEM Manager:	Date:
Mark A. Amick	6/27/2024

Inspection Photographs



Facility: Heidelberg Materials US Cement LLC
Photographer: Christina Sandlin
Date: 06/25/2024 Time: 3:03 PM
Others Present: Michael Harding and Chris Getz
Location/Description: Evidence of excessive solids noted on top of the two older dewatering bags. The two blue circles are the full bags that are no longer being utilized.



Facility: Heidelberg Materials US Cement LLC
Photographer: Christina Sandlin
Date: 06/25/2024 Time: 3:04 PM
Others Present: Michael Harding and Chris Getz
Location/Description: Evidence of excessive solids. Pictured is a dewatering bag that has been filled and is no longer being utilized located prior to Outfall 007 discharge pipe.