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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)(i). 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.

<b>Permit</b>	
<b>Permit #:</b>	<b>IN0003361</b>
<b>Major:</b>	No
<b>Permitted Feature:</b>	001 External Outfall
<b>Permittee:</b>	CARGILL, INC.
<b>Permittee Address:</b>	1502 WABASH AVE 1502 WABASH AVENUE LAFAYETTE, IN 479051066
<b>Discharge:</b>	<b>001-A</b> N-C COOLING, BOILER, BACKWASH
<b>Facility:</b>	CARGILL INC
<b>Facility Location:</b>	1503 WABASH AVE 1502 WABASH AVENUE LAFAYETTE, IN 479051066

<b>Report Dates &amp; Status</b>	
<b>Monitoring Period:</b>	From 08/01/23 to 08/31/23
<b>DMR Due Date:</b>	09/28/23
<b>Status:</b>	NetDMR Validated

**Considerations for Form Completion**  
INDUSTRIAL MINOR LAFAYETTE, TIPPECANOE COUNTY

<b>Principal Executive Officer</b>	
<b>First Name:</b>	Adam
<b>Last Name:</b>	Hudson
<b>Title:</b>	Plant Superintendent
<b>Telephone:</b>	765-420-6612

**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	
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0	--	Sample						=	5.0	=	5.0	19 - mg/L	0	01/30 - Monthly	GR - GRAB		
					Permit Req.										Req Mon MO AVG				Req Mon DAILY MX	19 - mg/L
					Value NODI															
00400	pH	1 - Effluent Gross	0	--	Sample					=	7.97		=	7.97	12 - SU	0	01/30 - Monthly	GR - GRAB		
					Permit Req.					>=	6.0 DAILY MN		<=	9.0 DAILY MX	12 - SU					
					Value NODI															
00530	Solids, total suspended	1 - Effluent Gross	0	--	Sample						=	11.0	=	11.0	19 - mg/L	0	01/30 - Monthly	GR - GRAB		
					Permit Req.										Req Mon MO AVG				Req Mon DAILY MX	19 - mg/L
					Value NODI															
00552	Oil and grease, hexane extr method	1 - Effluent Gross	0	--	Sample						<	5.0	<	5.0	19 - mg/L	0	01/30 - Monthly	GR - GRAB		
					Permit Req.						<=	10.0 MO AVG	<=	15.0 DAILY MX	19 - mg/L					
					Value NODI															
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0	--	Sample	=	0.037	=	0.062	03 - MGD						0	01/30 - Monthly	TM - TOTALZ		
					Permit Req.		Req Mon MO AVG		Req Mon DAILY MX	03 - MGD										
					Value NODI															
50060	Chlorine, total residual	1 - Effluent Gross	0	--	Sample						<	0.02	<	0.02	19 - mg/L	0	01/30 - Monthly	GR - GRAB		
					Permit Req.						<	0.06 MO AVG	<	0.06 DAILY MX	19 - mg/L					
					Value NODI															
82220	Flow, total	1 - Effluent Gross	0	--	Sample			=	1.144	80 - Mgal/mo						0	01/30 - Monthly	RT - RCOTOT		
					Permit Req.				Req Mon MO TOTAL	80 - Mgal/mo										
					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**  
Per IDEM's 4/3/2024 request, added estimated discharge flows for 8/1/2023 - 8/19/2023 based upon the average daily flows in Jan-2023, Feb-2023, Mar-2023, Sept-2023, Oct-2023 and Nov-2023.

**Attachments**

Name	Type	Size
Special_Report_Attached_08-2023.pdf	pdf	28683.0
IN0003361_MMR_001A_08_2023_2.pdf	pdf	89938.0
IN0003361_MMR_001A_08_2023.pdf	pdf	99834.0
IN0003361_MMR_001A_08_2023_revision.pdf	pdf	160239.0
IN0003361_MMR_001A_08_2023_2_revision.pdf	pdf	67025.0

**Report Last Saved By****CARGILL, INC.**

User: CHRISFOSTER1  
Name: Christopher Foster  
E-Mail: chris\_foster@cargill.com  
Date/Time: 2024-04-26 11:43 (Time Zone: -04:00)

**Report Last Signed By**

User: ADAMHUDSON  
Name: Adam Hudson  
E-Mail: adam\_hudson@cargill.com  
Date/Time: 2024-07-03 12:58 (Time Zone: -04:00)



# MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

## Indiana Discharge Monitoring Report

State Form 30530 (R3 / 3-14)

FACILITY NAME AND ADDRESS:  
 Cargill, Inc  
 1502 Wabash Avenue  
 Lafayette, IN 47905

PLEASE COMPLETE AND SUBMIT ONE COPY EACH MONTH.  
 THIS REPORT MUST BE POSTMARKED NO LATER THAN THE  
 28TH OF THE FOLLOWING MONTH.

Mail To: Indiana Department of Environmental Management  
 Office of Water Quality, Mail Code 65-42  
 100 North Senate Avenue  
 Indianapolis, Indiana 46204-2251

E-mail address: adam\_hudson@cargill.com

I	N	0	0	0	3	3	6	1
PERMIT NUMBER								

0	0	1	A
OUTFALL NO.			

0	8	2	3
MO.		YR.	

No Discharge   
 This is a revised submittal

EFFLUENT CHARACTERISTICS		FLOW	pH		BOD		TSS		Oil and Grease	
EFFLUENT PARAMETER NUMBER		Q50050	C00400		Q	C	Q	C	Q	C
SAMPLE TYPE	Permit Condition	24 Hr. Total	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB
	Monitored	24 Hr. Total	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB
FREQUENCY	Permit Condition	1 X Monthly	1 X Monthly	1 X Monthly	1 X Monthly	1 X Monthly	1 X Monthly	1 X Monthly	1 X Monthly	1 X Monthly
	Monitored	12 X Monthly	1 X Monthly	0 X Monthly	1 X Monthly	0 X Monthly	1 X Monthly	0 X Monthly	1 X Monthly	1 X Monthly
EFFLUENT LIMITATIONS	Permit Minimum	-	6.0	-	-	-	-	-	-	-
	Permit Average	-	-	-	-	-	-	-	-	10.00
	Permit Maximum	-	9.0	-	-	-	-	-	-	15.00

UNITS =	MGD	HI	LOW	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	MG/L
Tue 1									
Wed 2									
Thu 3									
Fri 4			7.97		5		11		5
Sat 5									
Sun 6									
Mon 7									
Tue 8									
Wed 9									
Thu 10									
Fri 11									
Sat 12									
Sun 13									
Mon 14									
Tue 15									
Wed 16									
Thu 17									
Fri 18									
Sat 19									
Sun 20	0.020								
Mon 21	0.022								
Tue 22	0.014								
Wed 23	0.003								
Thu 24	0.006								
Fri 25	0.026								
Sat 26	0.030								
Sun 27	0.031								
Mon 28	0.044								
Tue 29	0.040								
Wed 30	0.062								
Thu 31	0.061								
MONTHLY AVERAGE	0.030				5		11		5
HIGHEST VALUE	0.062	7.97			5		11		5
LOWEST VALUE	0.003	7.97			5		11		5
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED		0			0		0		0

TOTAL FLOW	0.359	Prepared by or under the direction of (Certified Operator):	Date (month, day, year)
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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 and evaluate the information submitted. Based on my inquiry of the 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.

Adam Hudson	9/11/2023
Preparer's telephone number 765-420-6612	Operator's certification number N/A
Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement) <i>Adam Hudson</i>	Date (month, day, year) 9/11/2023



# MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

## Indiana Discharge Monitoring Report

State Form 30530 (R3 / 3-14)

FACILITY NAME AND ADDRESS:

Cargill, Inc  
 1502 Wabash Avenue  
 Lafayette, IN 47905

PLEASE COMPLETE AND SUBMIT ONE COPY EACH MONTH.  
 THIS REPORT MUST BE POSTMARKED NO LATER THAN THE  
 28TH OF THE FOLLOWING MONTH.

Mail To: Indiana Department of Environmental Management  
 Office of Water Quality, Mail Code 65-42  
 100 North Senate Avenue  
 Indianapolis, Indiana 46204-2251

1	N	0	0	0	3	3	6	1
PERMIT NUMBER								

0	0	1	A
OUTFALL NO.			

0	8	2	3
MO.		YR.	

No Discharge   
 This is a revised submittal

EFFLUENT CHARACTERISTICS		TRC							
EFFLUENT PARAMETER NUMBER		Q	C	Q	C	Q	C	Q	C
SAMPLE TYPE	Permit Condition	GRAB	GRAB						
	Monitored	GRAB	GRAB						
FREQUENCY	Permit Condition	1 X Monthly	1 X Monthly						
	Monitored	0 X Monthly	1 X Monthly						
EFFLUENT LIMITATIONS	Permit Minimum								
	Permit Average	-	0.06						
	Permit Maximum	-	0.06						
UNITS=		LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	MG/L
	Tue	1							
	Wed	2							
	Thu	3							
	Fri	4	0.02						
	Sat	5							
	Sun	6							
	Mon	7							
	Tue	8							
	Wed	9							
	Thu	10							
	Fri	11							
	Sat	12							
	Sun	13							
	Mon	14							
	Tue	15							
	Wed	16							
	Thu	17							
	Fri	18							
	Sat	19							
	Sun	20							
	Mon	21							
	Tue	22							
	Wed	23							
	Thu	24							
	Fri	25							
	Sat	26							
	Sun	27							
	Mon	28							
	Tue	29							
	Wed	30							
	Thu	31							
MONTHLY AVERAGE			0.02						
HIGHEST VALUE			0.02						
LOWEST VALUE			0.02						
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED			0						

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 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): <b>Adam Hudson</b>	Date (month, day, year) <b>9/11/2023</b>
	Preparer's telephone number <b>765-420-6612</b>	Operator's certification number <b>N/A</b>
	Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement) <i>Adam Hudson</i>	Date (month, day, year) <b>9/11/2023</b>



# MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

## Indiana Discharge Monitoring Report

State Form 30530 (R3 / 3-14)

FACILITY NAME AND ADDRESS:

Cargill, Inc  
 1502 Wabash Avenue  
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 28TH OF THE FOLLOWING MONTH.

Mail To: Indiana Department of Environmental Management  
 Office of Water Quality, Mail Code 65-42  
 100 North Senate Avenue  
 Indianapolis, Indiana 46204-2251

I	N	0	0	0	3	3	6	1
PERMIT NUMBER								

0	0	1	A
OUTFALL NO.			

0	8	2	3
MO.		YR.	

No Discharge   
 This is a revised submittal

EFFLUENT CHARACTERISTICS		TRC							
EFFLUENT PARAMETER NUMBER		Q	C	Q	C	Q	C	Q	C
SAMPLE TYPE	Permit Condition	GRAB	GRAB						
	Monitored	GRAB	GRAB						
FREQUENCY	Permit Condition	1 X Monthly	1 X Monthly						
	Monitored	1 X Monthly	1 X Monthly						
EFFLUENT LIMITATIONS	Permit Minimum								
	Permit Average	-	0.06						
	Permit Maximum	-	0.06						
UNITS=		LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	MG/L
Tue	1								
Wed	2								
Thu	3								
Fri	4	0.00689297	0.02						
Sat	5								
Sun	6								
Mon	7								
Tue	8								
Wed	9								
Thu	10								
Fri	11								
Sat	12								
Sun	13								
Mon	14								
Tue	15								
Wed	16								
Thu	17								
Fri	18								
Sat	19								
Sun	20								
Mon	21								
Tue	22								
Wed	23								
Thu	24								
Fri	25								
Sat	26								
Sun	27								
Mon	28								
Tue	29								
Wed	30								
Thu	31								
MONTHLY AVERAGE		0.00689297	0.02						
HIGHEST VALUE		0.00689297	0.02						
LOWEST VALUE		0.00689297	0.02						
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED			0						

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 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): <b>Adam Hudson</b>		Date (month, day, year) <b>4/26/2024</b>
	Preparer's telephone number <b>765-420-6612</b>		Operator's certification number <b>N/A</b>
	Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement) <i>Adam Hudson</i>		Date (month, day, year) <b>4/26/2024</b>



# MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

## Indiana Discharge Monitoring Report

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 28TH OF THE FOLLOWING MONTH.

Mail To: Indiana Department of Environmental Management  
 Office of Water Quality, Mail Code 65-42  
 100 North Senate Avenue  
 Indianapolis, Indiana 46204-2251

E-mail address: adam\_hudson@cargill.com

1	N	0	0	0	3	3	6	1
PERMIT NUMBER								

0	0	1	A
OUTFALL NO.			

0	8	2	3
MO.		YR.	

No Discharge   
 This is a revised submittal

EFFLUENT CHARACTERISTICS		FLOW	pH		BOD		TSS		Oil and Grease	
EFFLUENT PARAMETER NUMBER		Q50050	C00400		Q	C	Q	C	Q	C
SAMPLE TYPE	Permit Condition	24 Hr. Total	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB
	Monitored	24 Hr. Total	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB
FREQUENCY	Permit Condition	1 X Monthly	1 X Monthly	1 X Monthly	1 X Monthly	1 X Monthly	1 X Monthly	1 X Monthly	1 X Monthly	1 X Monthly
	Monitored	31 X Monthly	1 X Monthly	1 X Monthly	1 X Monthly	1 X Monthly	1 X Monthly	1 X Monthly	1 X Monthly	1 X Monthly
EFFLUENT LIMITATIONS	Permit Minimum	-	6.0	-	-	-	-	-	-	-
	Permit Average	-	-	-	-	-	-	-	-	10.00
	Permit Maximum	-	9.0	-	-	-	-	-	-	15.00

UNITS =		MGD	HI	LOW	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	MG/L
Tue	1	0.041								
Wed	2	0.041								
Thu	3	0.041								
Fri	4	0.041	7.97		1.7232425	5	3.7911335	11	1.7232425	5
Sat	5	0.041								
Sun	6	0.041								
Mon	7	0.041								
Tue	8	0.041								
Wed	9	0.041								
Thu	10	0.041								
Fri	11	0.041								
Sat	12	0.041								
Sun	13	0.041								
Mon	14	0.041								
Tue	15	0.041								
Wed	16	0.041								
Thu	17	0.041								
Fri	18	0.041								
Sat	19	0.041								
Sun	20	0.020								
Mon	21	0.022								
Tue	22	0.014								
Wed	23	0.003								
Thu	24	0.006								
Fri	25	0.026								
Sat	26	0.030								
Sun	27	0.031								
Mon	28	0.044								
Tue	29	0.040								
Wed	30	0.062								
Thu	31	0.061								
MONTHLY AVERAGE		0.037			1.7232425	5	3.7911335	11	1.7232425	5
HIGHEST VALUE		0.062	7.97		1.7232425	5	3.7911335	11	1.7232425	5
LOWEST VALUE		0.003	7.97		1.7232425	5	3.7911335	11	1.7232425	5
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED		0	0			0		0		0

TOTAL FLOW	1.144	Prepared by or under the direction of (Certified Operator):	Date (month, day, year)
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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 and evaluate the information submitted. Based on my inquiry of the 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.	Adam Hudson	4/26/2024
	Preparer's telephone number	Operator's certification number
	765-420-6612	N/A
Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement)	Date (month, day, year)	
<i>Adam Hudson</i>	4/26/2024	

**September 12, 2023**

Subject: Cargill Lafayette, IN Aug-2023 NPDES DMR Special Report

As previously reported in Cargill's July-2023 NPDES DMR Special Reports, the Cargill Lafayette, IN facility's NPDES Outfall 001A flow meter panel was damaged beyond repair on May 1, 2023 when a truck inadvertently backed into the flow meter's control / data recording panel.

A new flow monitoring system for Outfall 001A was commissioned on 8-20-2023.

If you should have any questions or comments regarding this, please contact Adam Hudson at 309-827-7143 or [adam\\_hudson@cargill.com](mailto:adam_hudson@cargill.com).

Thank you.

*Adam Hudson*

Adam Hudson  
Plant Superintendent