

DMR Copy of Record

Permit

Permit #:

INP000627

Major:

No

Permittee:

MATERIAL HANDLING EXCHANGE, INC.

Permittee Address:

1800 CHURCHMAN AVE
INDIANAPOLIS, IN 46203

Facility:

MATERIAL HANDLING EXCHANGE, INC.

Facility Location:

1001 N HURRICANE ST
FRANKLIN, IN 46131

Permitted Feature:

001
External Outfall

Discharge:

001-A
POWDER COAT METAL PARTS - TO FRANKLIN POTW

Report Dates & Status

Monitoring Period:

From 06/01/18 to 06/30/18

DMR Due Date:

07/28/18

Status:

NetDMR Validated

Considerations for Form Completion

THE FLOW MUST BE MEASURED USING VALID FLOW MEASUREMENT DEVICES. PRETREATMENT TO FRANKLIN POTW JOHNSON COUNTY

Principal Executive Officer

First Name:

Will

Last Name:

Mains

Title:

Operations Manager

Telephone:

317-788-7225

No Data Indicator (NODI)

Form NODI:

--

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						=	5.81			=	7.25	12 - SU		01/01 - Daily	GR - GRAB
					Permit Req.						>=	5 DAILY MN			<=	10 DAILY MX	12 - SU	0	01/01 - Daily	GR - GRAB
					Value NODI															
00720	Cyanide, total [as CN]	1 - Effluent Gross	0	--	Sample							<	0.02		<	0.02	19 - mg/L		01/30 - Monthly	GR - GRAB
					Permit Req.							<=	.65 MO AVG		<=	1.2 DAILY MX	19 - mg/L	0	01/30 - Monthly	GR - GRAB
					Value NODI															
01074	Nickel, total recoverable	1 - Effluent Gross	0	--	Sample							<	0.05		<	0.05	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.							<=	2.38 MO AVG		<=	3.98 DAILY MX	19 - mg/L	0	01/30 - Monthly	24 - COMP24
					Value NODI															
01079	Silver total recoverable	1 - Effluent Gross	0	--	Sample							<	0.01		<	0.01	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.							<=	.24 MO AVG		<=	.43 DAILY MX	19 - mg/L	0	01/30 - Monthly	24 - COMP24
					Value NODI															
01094	Zinc, total recoverable	1 - Effluent Gross	0	--	Sample							=	0.05		=	0.05	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.							<=	1.48 MO AVG		<=	2.61 DAILY MX	19 - mg/L	0	01/30 - Monthly	24 - COMP24
					Value NODI															
01113	Cadmium, total recoverable	1 - Effluent Gross	0	--	Sample							<	0.01		<	0.01	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.							<=	.07 MO AVG		<=	.11 DAILY MX	19 - mg/L	0	01/30 - Monthly	24 - COMP24
					Value NODI															
01114	Lead, total recoverable	1 - Effluent Gross	0	--	Sample							<	0.05		<	0.05	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.							<=	.43 MO AVG		<=	.69 DAILY MX	19 - mg/L	0	01/30 - Monthly	24 - COMP24
					Value NODI															
01118	Chromium, total recoverable	1 - Effluent Gross	0	--	Sample							<	0.02		<	0.02	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.							<=	1.71 MO AVG		<=	2.77 DAILY MX	19 - mg/L	0	01/30 - Monthly	24 - COMP24
					Value NODI															
01119	Copper, total recoverable	1 - Effluent Gross	0	--	Sample							=	0.32		=	0.32	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.							<=	2.07 MO AVG		<=	3.38 DAILY MX	19 - mg/L	0	01/30 - Monthly	24 - COMP24
					Value NODI															
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0	--	Sample	=	0.00281	=	0.0214	03 - MGD									01/01 - Daily	TM - TOTALZ
					Permit Req.		Req Mon MO AVG		Req Mon DAILY MX	03 - MGD								0	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
INP000627_001A_MMR_2018_06.pdf	pdf	89082

Report Last Saved By

MATERIAL HANDLING EXCHANGE, INC.

User:

rlkassab@sbcglobal.net

Name:

Raymond Kassab

E-Mail:	rlkassab@sbcglobal.net
Date/Time:	2018-07-16 12:20 (Time Zone: -04:00)
<i>Report Last Signed By</i>	
User:	PRODUCTION@M-H-E.COM
Name:	Sarah McKee
E-Mail:	production@m-h-e.com
Date/Time:	2018-07-16 13:20 (Time Zone: -04:00)

DMR Copy of Record

Permit

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INP000627

Major:

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Facility Location:

1001 N HURRICANE ST
FRANKLIN, IN 46131

Permitted Feature:

001
External Outfall

Discharge:

001-AS
SEMIANNUAL TTO

Report Dates & Status

Monitoring Period:

From 01/01/18 to 06/30/18

DMR Due Date:

07/28/18

Status:

NetDMR Validated

Considerations for Form Completion

SEMIANNUAL TTO REPORTING PRETREATMENT TO FRANKLIN POTW, JOHNSON COUNTY

Principal Executive Officer

First Name:

Will

Last Name:

Mains

Title:

Operations Manager

Telephone:

317-788-7225

No Data Indicator (NODI)

Form 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
INP000627_001A_MMR_2018_05.pdf	pdf	89186

Report Last Saved By

MATERIAL HANDLING EXCHANGE, INC.

User:

rlkassab@sbcglobal.net

Name:

Raymond Kassab

E-Mail:

rlkassab@sbcglobal.net

Date/Time:

2018-06-25 07:29 (Time Zone: -04:00)

Report Last Signed By

PRODUCTION@M-H-E.COM

User:

Sarah McKee

Name:

Sarah McKee

E-Mail:

production@m-h-e.com

Date/Time:

2018-06-25 08:45 (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:

Material Handling Exchange, Inc.
1001 Hurricane Street
Franklin, Indiana

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: wmains@m-h-e.com

I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	1
OUTFALL NO.		

0	6	1	8
MO.		YR.	

No Discharge

This is a revised submittal

EFFLUENT CHARACTERISTICS		FLOW	pH		CYANIDE, TOTAL (CN)		NICKEL, TOTAL (NI)		SILVER, TOTAL (Ag)	
EFFLUENT PARAMETER NUMBER		Q50050	C00400		Q	C 00720	Q	C01074	Q	C01079
SAMPLE TYPE	Permit Condition	24TOT	GRAB			GRAB		GRAB		GRAB
	Monitored	24TOT	COMP			COMP		COMP		COMP
FREQUENCY	Permit Condition	DAILY	METER			MONTHLY		MONTHLY		MONTHLY
	Monitored	DAILY	MONTHLY			MONTHLY		MONTHLY		MONTHLY
EFFLUENT LIMITATIONS	Permit Minimum	N/A	5.0		N/A	N/A	N/A	N/A	N/A	N/A
	Permit Average	REPORT	N/A			0.65		2.38		0.24
	Permit Maximum	REPORT	10.0			1.20		3.98		0.43
UNITS =		MGD	HI	LOW	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	MG/L
	Fri 1	0.001400	6.29	6.29						
	Sat 2	No Discharge	No Discharge							
	Sun 3	No Discharge	No Discharge							
	Mon 4	0.021400	7.25	7.25						
	Tue 5	0.002100	5.99	5.99						
	Wed 6	0.002700	6.02	6.02						
	Thu 7	0.000600	6.90	6.90						
	Fri 8	0.001500	6.96	6.96		<0.02		<0.05		<0.01
	Sat 9	No Discharge	No Discharge							
	Sun 10	No Discharge	No Discharge							
	Mon 11	0.002000	6.84	6.84						
	Tue 12	0.002100	6.82	6.82						
	Wed 13	0.002200	6.93	6.93						
	Thu 14	0.002200	6.97	6.97						
	Fri 15	0.002000	6.53	6.53						
	Sat 16	No Discharge	No Discharge							
	Sun 17	No Discharge	No Discharge							
	Mon 18	0.000500	5.81	5.81						
	Tue 19	0.002600	6.68	6.68						
	Wed 20	0.001500	6.83	6.83						
	Thu 21	0.002800	6.80	6.80						
	Fri 22	0.001700	6.62	6.62						
	Sat 23	No Discharge	No Discharge							
	Sun 24	No Discharge	No Discharge							
	Mon 25	0.000500	6.29	6.29						
	Tue 26	0.001800	5.85	5.85						
	Wed 27	0.002000	6.45	6.45						
	Thu 28	0.002700	5.88	5.88						
	Fri 29	0.001300	6.86	6.86						
	Sat 30	No Discharge	No Discharge							
MONTHLY AVERAGE		0.002810				<0.02		<0.05		<0.01
HIGHEST VALUE		0.021400	7.25			<0.02		<0.05		<0.01
LOWEST VALUE		0.000500	5.81			<0.02		<0.05		<0.01
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED		0	0			0		0		0
TOTAL FLOW		0.057600								

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.

Prepared by or under the direction of (Certified Operator):		Date (month, day, year)
Raymond Kassab		7/16/2018
Preparer's telephone number	Operator's certification number	
(317) 841-8280	WW019266	
Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement)		Date (month, day, year)
Will Mains		7/16/2018



MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

State Form 30530 (R3 / 3-14)

FACILITY NAME AND ADDRESS:

Material Handling Exchange, Inc.
1001 Hurricane Street
Franklin, Indiana

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

I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	1	
OUTFALL NO.			

0	6	1	8
MO.		YR.	

No Discharge ☐

This is a revised submittal ☐

EFFLUENT CHARACTERISTICS		ZINC, TOTAL (Zn)		CADMIUM, TOTAL (Cd)		LEAD, TOTAL (Pb)		CHROMIUM, TOTAL (Cr)	
EFFLUENT PARAMETER NUMBER		Q	C01094	Q	C01113	Q	C01114	Q	C01118
SAMPLE TYPE	Permit Condition		GRAB		GRAB		GRAB		GRAB
	Monitored		COMP		COMP		COMP		COMP
FREQUENCY	Permit Condition		MONTHLY		MONTHLY		MONTHLY		MONTHLY
	Monitored		MONTHLY		MONTHLY		MONTHLY		MONTHLY
EFFLUENT LIMITATIONS	Permit Minimum		N/A		N/A		N/A		N/A
	Permit Average		1.48		0.07		0.43		1.71
	Permit Maximum		2.61		0.11		0.69		2.77
UNITS=		LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	MG/L
	Fri 1								
	Sat 2								
	Sun 3								
	Mon 4								
	Tue 5								
	Wed 6								
	Thu 7								
	Fri 8		0.05		<0.01		<0.05		<0.02
	Sat 9								
	Sun 10								
	Mon 11								
	Tue 12								
	Wed 13								
	Thu 14								
	Fri 15								
	Sat 16								
	Sun 17								
	Mon 18								
	Tue 19								
	Wed 20								
	Thu 21								
	Fri 22								
	Sat 23								
	Sun 24								
	Mon 25								
	Tue 26								
	Wed 27								
	Thu 28								
	Fri 29								
	Sat 30								
MONTHLY AVERAGE			0.05		<0.01		<0.05		<0.02
HIGHEST VALUE			0.05		<0.01		<0.05		<0.02
LOWEST VALUE			0.05		<0.01		<0.05		<0.02
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED			0		0		0		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): Raymond Kassab		Date (month, day, year) 7/16/2018
Preparer's telephone number (317) 841-8280	Operator's certification number WW019226	
Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement) Will Mains		Date (month, day, year) 7/16/2018



MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

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Office of Water Quality, Mail Code 65-42
100 North Senate Avenue
Indianapolis, Indiana 46204-2251

I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	1
OUTFALL NO.		

0	6	1	8
MO.		YR.	

No Discharge ☐
This is a revised submittal ☐

EFFLUENT CHARACTERISTICS		COPPER	TTO					
EFFLUENT PARAMETER NUMBER		C01119	C78141					
SAMPLE TYPE	Permit Condition	GRAB	GRAB					
	Monitored	COMP	GRAB					
FREQUENCY	Permit Condition	MONTHLY	2X/YEAR					
	Monitored	MONTHLY	2X/YEAR					
EFFLUENT LIMITATIONS	Permit Minimum	N/A	N/A					
	Permit Average	2.07	N/A					
	Permit Maximum	3.38	2.13					
UNITS=								
	Fri 1							
	Sat 2							
	Sun 3							
	Mon 4							
	Tue 5							
	Wed 6							
	Thu 7							
	Fri 8	0.32						
	Sat 9							
	Sun 10							
	Mon 11							
	Tue 12							
	Wed 13							
	Thu 14							
	Fri 15							
	Sat 16							
	Sun 17							
	Mon 18							
	Tue 19							
	Wed 20							
	Thu 21							
	Fri 22							
	Sat 23							
	Sun 24							
	Mon 25							
	Tue 26							
	Wed 27							
	Thu 28							
	Fri 29							
	Sat 30							
MONTHLY AVERAGE		0.32						
HIGHEST VALUE		0.32						
LOWEST VALUE		0.32						
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED		0	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): Raymond Kassab		Date (month, day, year) 7/16/2018
	Preparer's telephone number (317) 841-8280		Operator's certification number WW019226
	Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement) Will Mains		Date (month, day, year) 7/16/2018



MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

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Office of Water Quality, Mail Code 65-42
100 North Senate Avenue
Indianapolis, Indiana 46204-2251

E-mail address: wmains@m-h-e.com

I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	1
OUTFALL NO.		

0	5	1	8
MO.		YR.	

No Discharge ☐

This is a revised submittal ☐

EFFLUENT CHARACTERISTICS		FLOW	pH	CYANIDE, TOTAL (CN)		NICKEL, TOTAL (NI)		SILVER, TOTAL (Ag)	
EFFLUENT PARAMETER NUMBER		Q50050	C00400	Q	C 00720	Q	C01074	Q	C01079
SAMPLE TYPE	Permit Condition	24TOT	GRAB		GRAB		GRAB		GRAB
	Monitored	24TOT	COMP		COMP		COMP		COMP
FREQUENCY	Permit Condition	DAILY	METER		MONTHLY		MONTHLY		MONTHLY
	Monitored	DAILY	MONTHLY		MONTHLY		MONTHLY		MONTHLY
EFFLUENT LIMITATIONS	Permit Minimum	N/A	5.0	N/A	N/A	N/A	N/A	N/A	N/A
	Permit Average	REPORT	N/A		0.65		2.38		0.24
	Permit Maximum	REPORT	10.0		1.20		3.98		0.43

UNITS =		MGD	HI	LOW	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	MG/L
Tue	1	0.001700	7.04	7.04						
Wed	2	0.002200	7.24	7.24						
Thu	3	0.003100	7.08	7.08						
Fri	4	0.002500	7.05	7.05						
Sat	5	No Discharge	No Discharge							
Sun	6	No Discharge	No Discharge							
Mon	7	0.002100	7.15	7.15						
Tue	8	0.001100	7.20	7.20						
Wed	9	0.002500	7.02	7.02						
Thu	10	0.002200	6.95	6.95						
Fri	11	0.002900	6.97	6.97						
Sat	12	No Discharge	No Discharge							
Sun	13	No Discharge	No Discharge							
Mon	14	0.001700	6.94	6.94		0.06		<0.05		<0.01
Tue	15	0.003000	6.58	6.58						
Wed	16	0.001800	6.78	6.78						
Thu	17	0.002100	6.98	6.98						
Fri	18	0.001500	6.95	6.95						
Sat	19	No Discharge	No Discharge							
Sun	20	No Discharge	No Discharge							
Mon	21	0.002300	7.08	7.08						
Tue	22	0.002000	7.08	7.08						
Wed	23	0.002400	6.46	6.46						
Thu	24	0.002700	6.89	6.89						
Fri	25	0.001300	5.92	5.92						
Sat	26	No Discharge	No Discharge							
Sun	27	No Discharge	No Discharge							
Mon	28	No Discharge	No Discharge							
Tue	29	0.002300	7.04	7.04						
Wed	30	0.002100	7.23	7.23						
Thu	31	0.003400	6.58	6.58						

MONTHLY AVERAGE	0.002248				0.06		<0.05		<0.01
HIGHEST VALUE	0.003400	7.24			0.06		<0.05		<0.01
LOWEST VALUE	0.001100	5.92			0.06		<0.05		<0.01
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED	0	0			0		0		0

TOTAL FLOW	0.048900	Prepared by or under the direction of (Certified Operator):	Date (month, day, year)
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.		Raymond Kassab	6/21/2018
		Preparer's telephone number	Operator's certification number
		(317) 841-8280	WW019266
		Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement)	Date (month, day, year)
		Will Mains	6/21/2018



MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

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I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	1	
OUTFALL NO.			

0	5	1	8
MO.		YR.	

No Discharge

This is a revised submittal

EFFLUENT CHARACTERISTICS		ZINC, TOTAL (Zn)		CADMIUM, TOTAL (Cd)		LEAD, TOTAL (Pb)		CHROMIUM, TOTAL (Cr)	
EFFLUENT PARAMETER NUMBER		Q	C01094	Q	C01113	Q	C01114	Q	C01118
SAMPLE TYPE	Permit Condition		GRAB		GRAB		GRAB		GRAB
	Monitored		COMP		COMP		COMP		COMP
FREQUENCY	Permit Condition		MONTHLY		MONTHLY		MONTHLY		MONTHLY
	Monitored		MONTHLY		MONTHLY		MONTHLY		MONTHLY
EFFLUENT LIMITATIONS	Permit Minimum		N/A		N/A		N/A		N/A
	Permit Average		1.48		0.07		0.43		1.71
	Permit Maximum		2.61		0.11		0.69		2.77
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								
	Sat 5								
	Sun 6								
	Mon 7								
	Tue 8								
	Wed 9								
	Thu 10								
	Fri 11								
	Sat 12								
	Sun 13								
	Mon 14		0.02		<0.01		<0.05		<0.02
	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		<0.01		<0.05		<0.02
HIGHEST VALUE			0.02		<0.01		<0.05		<0.02
LOWEST VALUE			0.02		<0.01		<0.05		<0.02
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED			0		0		0		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):		Date (month, day, year)
Raymond Kassab		6/21/2018
Preparer's telephone number	Operator's certification number	
(317) 841-8280	WW019226	
Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement)		Date (month, day, year)
Will Mains		6/21/2018



MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

State Form 30530 (R3 / 3-14)

FACILITY NAME AND ADDRESS:

Material Handling Exchange, Inc.
1001 Hurricane Street
Franklin, Indiana

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

I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	1
OUTFALL NO.		

0	5	1	8
MO.		YR.	

No Discharge ☐
This is a revised submittal ☐

EFFLUENT CHARACTERISTICS		COPPER	TTO					
EFFLUENT PARAMETER NUMBER		C01119	C78141					
SAMPLE TYPE	Permit Condition	GRAB	GRAB					
	Monitored	COMP	GRAB					
FREQUENCY	Permit Condition	MONTHLY	2X/YEAR					
	Monitored	MONTHLY	2X/YEAR					
EFFLUENT LIMITATIONS	Permit Minimum	N/A	N/A					
	Permit Average	2.07	N/A					
	Permit Maximum	3.38	2.13					
UNITS=								
	Tue 1							
	Wed 2							
	Thu 3							
	Fri 4							
	Sat 5							
	Sun 6							
	Mon 7							
	Tue 8							
	Wed 9							
	Thu 10							
	Fri 11							
	Sat 12							
	Sun 13							
	Mon 14	0.25	0.015					
	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		0.25	0.015					
HIGHEST VALUE		0.25	0.015					
LOWEST VALUE		0.25	0.015					
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED		0	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): Raymond Kassab		Date (month, day, year) 6/21/2018
	Preparer's telephone number (317) 841-8280		Operator's certification number WW019226
	Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement) Will Mains		Date (month, day, year) 6/21/2018