DMR Copy of Record

Permit																			
Permit #:	INP000627		Permitte	e:	Ν	ATERIAL	HANDLING EX	CHANGE,	, INC.				Facil	ity:		MATERIAL	HANDLI	ING EXCHANGE, INC.	
Major:	No		Permitte	e Address:		001 HURR RANKLIN,							Facil	ity Location	n:	1001 N HUI FRANKLIN,			
	001 External Outfall		Discharg	je:	-	101-A 101 Powde	R COAT MET	AL PARTS	S - TO FRANKLIN	I POTW									
Report Dates & Status		I																	
	From 07/01/22 to 07/3	31/22	DMR Due Date:			8/28/22							Statu	is:		NetDMR Va	lidated		
Considerations for Form Co	mpletion	ľ											1						
THE FLOW MUST BE MEASU Principal Executive Officer	JRED USING VALID F	LOW MEASURE	MENT DE	EVICES. PR	ETREATM	IENT TO FF	RANKLIN POTV	W JOHNS	ON COUNTY										
	joe	I	Title:		C	Operations I	Janager						Tolor	ohone:		317-446-09	35		
	amato		me.				vialiagei						Telek	mone.		517-440-03	00		
No Data Indicator (NODI)		I																	
Parameter		Monitoring Locatio	n Season #	Param. NODI	1		Qua	ntity or Loa	ding				Quali	ty or Concent	ration			# of Ex. Frequency of Analy	vsis Sample Type
Code N	ame	Ŭ				Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier	1 Value 1		Value 2		3 Value 3	Units		
					Sample Permit Reg						= >=	6.77 5.0 DAILY MN			= <=	7.11 10.0 DAILY MX	12 - SU	01/01 - Daily 01/01 - Daily	GR - GRAB GR - GRAB
00400 pH		1 - Effluent Gross	0		Value NOD							J.O DAILT WIN			~-	10.0 DAILT M	(12-00	01/01 - Daily	
					Sample											0.055	19 - mg/		GR - GRAB
X 00720 Cyanide, total [as C	[N]	1 - Effluent Gross	0		Permit Req								<=	0.02 MO AVG	i <=	0.02 DAILY M	(19 - mg/l	L 01/30 - Monthly	GR - GRAB
					Value NOD														
					Sample Permit Req									0.07 1.6 MO AVG		0.07 1.6 DAILY MX	19 - mg/		24 - COMP24 24 - COMP24
01074 Nickel, total recove	radie	1 - Effluent Gross	0		Value NOD												- 5		
					Sample								<	0.005	<	0.005	19 - mg/	L 01/30 - Monthly	24 - COMP24
01079 Silver total recover	able	1 - Effluent Gross	0		Permit Req								<=	0.24 MO AVG	<=	0.43 DAILY MX	(19 - mg/	L 01/30 - Monthly	24 - COMP24
					Value NOD	I													
					Sample											0.04	19 - mg/		24 - COMP24
01094 Zinc, total recovera	ble	1 - Effluent Gross	0		Permit Req Value NOD								<=	1.48 MO AVG	<=	2.0 DAILY MX	19 - mg/l	L 01/30 - Monthly	24 - COMP24
					Sample								<	0.005	<	0.005	19 - mg/	L 01/30 - Monthly	24 - COMP24
01113 Cadmium, total rec	overable	1 - Effluent Gross	0		Permit Req								<=	0.07 MO AVG	i <=	0.11 DAILY M	(19 - mg/	L 01/30 - Monthly	24 - COMP24
					Value NOD	I													
					Sample											0.01	19 - mg/		24 - COMP24
01114 Lead, total recovera	able	1 - Effluent Gross	0		Permit Req								<=	0.13 MO AVG	i <=	0.13 DAILY M	(19 - mg/l	L 01/30 - Monthly	24 - COMP24
					Value NOD									0.01		0.01	10 mm	L 01/30 - Monthly	24 - COMP24
01118 Chromium, total re	oovorablo	1 - Effluent Gross	0		Sample Permit Req									1.71 MO AVG		0.01 2.77 DAILY M	19 - mg/ (19 - mg/		24 - COMP24 24 - COMP24
Chiomiun, iotai re	coverable	1 - Ellident Gloss	0		Value NOD	1													
					Sample								=	0.07	=	0.07	19 - mg/	L 01/30 - Monthly	24 - COMP24
01119 Copper, total recov	verable	1 - Effluent Gross	0		Permit Req								<=	0.31 MO AVG	i <=	0.31 DAILY M	(19 - mg/	L 01/30 - Monthly	24 - COMP24
					Value NOD	1													
					Sample Bormit Bog					03 - MGD								01/01 - Daily	TM - TOTALZ
50050 Flow, in conduit or	thru treatment plant	1 - Effluent Gross	0		Permit Req		Req Mon MO AVG		Req Mon DAILY MX	03 - MGD								01/01 - Daily	TM - TOTALZ
					Value NOD														

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

	Parameter	Monitoring Location	Field		Description				
Cod	e Name	Monitoring Location			Description				
00720	Cyanide, total [as CN]	1 - Effluent Gross	Quality or Concentration Sample Value 3	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.				
00720	Cyanide, total [as CN]	1 - Effluent Gross	Quality or Concentration Sample Value 2	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.				

Acknowledge
Yes
Yes

Comments

We have gotten on a better maintenance schedule and the first sample was taken right before take cleaning and the second was taken right after. I believe that we should be able to maintain better cyanide levels moving forward as you can see from the second test that we took this month.

Attachments

	Name	Туре	Size				
Analytical_20220725_132946.pdf		pdf	1152846.0				
Analytical_20220804_114009.pdf		pdf	1091210.0				
INP000627_001A_MMR_2022_7.pdf		pdf 320925.0					
Report Last Saved By							
MATERIAL HANDLING EXCHANGE, INC.							
User:	JONAMATO						
Name:	Jonathan amato						
E-Mail:	jonamato@m-h-e.com						
Date/Time:	2022-09-06 10:55 (Time Zone: -04:00)						
Report Last Signed By							
User:	JONAMATO						
Name:	ne: Jonathan amato						
E-Mail:	il: jonamato@m-h-e.com						
Date/Time:	2022-09-06 10:55 (Time Zone: -04:00)						

DMR Copy of Record

Permit																			
Permit #:	INP000627			Permittee:		MA	TERIAL HANDL	ING EXCH	HANGE, INC.					Facility:		MATERIAL HA	NDLING EX	CHANGE, INC.	
Major:	No			Permittee Ad	ddress:		01 HURRICANE ANKLIN, IN 461							Facility Location	n:	1001 N HURRI FRANKLIN, IN			
Permitted Feature:	002 External Outfall		ĺ	Discharge:		002 002		AT METAL	PARTS - TO FRA	NKLIN PO	OTW								
Report Dates & Status			1																
Monitoring Period:	From 07/01/22 to	o 07/31/22		DMR Due Da	ite:	08/	/28/22							Status:		NetDMR Valida	ated		
Considerations for Form C	completion		1										ļ						
THE FLOW MUST BE MEAS	SURED USING VAL	ID FLOW MEASUR	REMEN	IT DEVICES.	PRETREAT	TMENT TO	FRANKLIN POT	TW JOHNS	SON COUNTY										
Principal Executive Officer	r																		
First Name:	joe			Title:		Op	erations Manage	ər						Telephone:		317-446-0435			
Last Name:	amato												I						
No Data Indicator (NODI)																			
Form NODI:																			
Parameter	r	Monitoring Location	Season	n # Param. NODI			Qua	ntity or Loa	ding				Qı	ality or Concentrat	ion		# c	of Ex. Frequency of Analy	ysis Sample Type
Code Na	me					Qualifier 1	Value 1	Qualifier 2	Value 2	Units 0	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	3 Value 3	Units		
00400 pH		1 - Effluent Gross	0		Sample Permit Req.					>	·= 5	5.0 DAILY MN			<=	10.0 DAILY MX	12 - SU	01/01 - Daily	GR - GRAB
00400 p 11		1 - Ellident Gloss	0		Value NODI							C - No Discharge				C - No Discharge			
					Sample														
00720 Cyanide, total [as CM	N]	1 - Effluent Gross	0		Permit Req.								<=	0.02 MO AVG	<=	0.02 DAILY MX	19 - mg/L	01/30 - Monthly	GR - GRAB
					Value NODI									C - No Discharge		C - No Discharge			
					Sample												10 11		
01074 Nickel, total recovera	able	1 - Effluent Gross	0		Permit Req.									1.6 MO AVG	<=	1.6 DAILY MX	19 - mg/L	01/30 - Monthly	24 - COMP24
					Value NODI									C - No Discharge		C - No Discharge			
01079 Silver total recoveral	blo	1 - Effluent Gross	0		Sample Permit Req.								<=	0.24 MO AVG	<=	0.43 DAILY MX	19 - mg/L	01/30 - Monthly	24 - COMP24
Silver total recovera	DIG	I - Ellident Gloss	0		Value NODI									C - No Discharge		C - No Discharge			
					Sample											_			
01094 Zinc, total recoverab	ble	1 - Effluent Gross	0		Permit Req.								<=	1.48 MO AVG	<=	2.0 DAILY MX	19 - mg/L	01/30 - Monthly	24 - COMP24
					Value NODI									C - No Discharge		C - No Discharge			
					Sample												10 11		
01113 Cadmium, total reco	verable	1 - Effluent Gross	0		Permit Req.								<=	0.07 MO AVG	<=	0.11 DAILY MX	19 - mg/L	01/30 - Monthly	24 - COMP24
					Value NODI									C - No Discharge		C - No Discharge			
01114 Lead, total recoveral		1 - Effluent Gross	0		Sample Permit Req.								<=	0.13 MO AVG	<=	0.13 DAILY MX	19 - mg/L	01/30 - Monthly	24 - COMP24
Lead, total recoveral	bie	I - Elliuent Gross	0		Value NODI									C - No Discharge		C - No Discharge			
					Sample											<u> </u>			
01118 Chromium, total reco	overable	1 - Effluent Gross	0		Permit Req.								<=	1.71 MO AVG	<=	2.77 DAILY MX	19 - mg/L	01/30 - Monthly	24 - COMP24
					Value NODI									C - No Discharge		C - No Discharge			
					Sample														
01119 Copper, total recove	rable	1 - Effluent Gross	0		Permit Req.									0.31 MO AVG	<=	0.31 DAILY MX	19 - mg/L	01/30 - Monthly	24 - COMP24
					Value NODI									C - No Discharge		C - No Discharge			
					Sample													04/04 D 1	TM - TOTALZ
50050 Flow, in conduit or tl	h		0		Permit Req.	R	Req Mon MO AVG		Reg Mon DAILY MX	03 - MGD								01/01 - Daily	TIVI - TOTALZ

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

INP000627_002A_MMR_2022_7.pdf	
Report Last Saved By	
MATERIAL HANDLING EXCHANGE, INC.	
User:	JONAMATO
Name:	Jonathan amato
E-Mail:	jonamato@m-h-e.com
Date/Time:	2022-09-06 10:21 (Time Zone: -04:00)
Report Last Signed By	
User:	JONAMATO
Name:	Jonathan amato
E-Mail:	jonamato@m-h-e.com
Date/Time:	2022-09-06 10:31 (Time Zone: -04:00)





WATER & WASTEWATER LABORATORIES, INC.

Client: Material Handling Exchange, Inc. Address: 1800 Churchman Ave Indianapolis, IN 46203 Attention: Jonathan Amato

Analysis Certified By:

Report Date: July 25, 2022

P.O. #: verbal page 1 of 2

Column #	Sample Description	Sample Date	Recd. Date	Sample #
#1	Wastewater Effluent Composite	7/14/22	7/18/22	22-2974
#2	Wastewater Effluent Grab	7/14/22	7/18/22	22-2975
#3				

Parameter	#1	#2	#3	Units	Method	PQL .
Fotal Metals				-	200.2	-
Cadmium	<0.005	-		mg/L	200.7	0.005
Chromium, total	<0.01	-		mg/L	200.7	0.01
Copper	0.07	-		mg/L	200.7	0.01
Lead	<0.01	-		mg/L	200.7	0.01
Nickel	0.07	-		mg/L	200.7	0.01
Silver	<0.005	-		mg/L	200.7	0.005
Zinc	0.04	-		mg/L	200.7	0.01
Total Cyanide	-	0.10		mg/L	4500CN C/E	0.01
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			1 4 4 5 10 1 1 C 10 10 10 10 10 10 10 10 10 10 10 10 10			
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Unit Desc: mg/L = milligrams per liter (ppm), ug/L = micrograms per liter (ppb), mg/Kg = milligrams per Kilograms (ppm) Std = Standard pH units, ng/L = nanograms per liter (ppt), ND= not detected, below the Practical Quantitation Limit-PQL) < = less than (not detected, below listed value), > = greater than (higher than listed value)

0 01	
11.91	
John Ondo	

Laboratory Manager



Client: Material Handling Exchange, Inc. Address: 1800 Churchman Ave Indianapolis, IN 46203 Attention: Jonathan Amato

Report Date: July 25, 2022

P.O. #: verbal page 2 of 2

Column #	Sample Description	Sample Date	Recd. Date	Comula #
#1	Wastewater Effluent Composite	7/14/22	7/18/22	Sample #
	Wastewater Effluent Grab	7/14/22		22-2974
#3			7/18/22	22-2975

	Method	Matrix Spike	Matrix D	uplicate				
LCS % recovery	Blank mg/L	(MS) % recovery	Spike (MSD) % recovery	Sample (Dup) % Deviation	Test PQL Method		Analyst	Date Analyzed
					-	1		7/20/2022
103	<0.005	99	-	0	0.005	200.7		7/24/2022
101	<0.01	98	-	4	0.01	200.7		7/24/2022
105	<0.01	106	-	0	0.01			7/24/2022
96	<0.01	92	-	0	0.01			7/24/2022
100	<0.01	98	-	2				7/24/2022
99	<0.005	99	-	0	0.005			7/24/2022
104	<0.01	108	-	0	0.01	200.7	RK	7/24/2022
97	<0.01	78	-	0	0.01	4500CN C/E	JO	7/20/2022
							: ; ; ;	2012 (100) 1000 - 1000 - 10
		-				the second		
	103 101 105 96 100 99 104	LCS Blank % recovery mg/L 103 <0.005	LCS Blank mg/L (MS) % recovery 103 <0.005	LCS Blank (MS) Spike (MSD) % recovery mg/L % recovery % recovery 103 <0.005	LCS Blank (MS) Spike (MSD) Sample (Dup) % recovery mg/L % recovery % recovery % Deviation 103 <0.005	LCS Blank mg/L (MS) Spike (MSD) % recovery Sample (Dup) % Deviation PQL 103 <0.005	LCS Blank mg/L (MS) Spike (MSD) % recovery Sample (Dup) % Deviation Test PQL Method 103 <0.005	LCS Blank (MS) Spike (MSD) Sample (Dup) Test Analyst % recovery mg/L % recovery % recovery % Deviation PQL Method Analyst 103 <0.005

Unit Desc: mg/L = milligrams per liter (ppm), ppm = parts per million

ND= not detected, below the Practical Quantitation Limit-PQL), < = less than (not detected, below listed value)

Analysis Certified By:	N.A.	Laboratory Manager
	John Ondo	

n.c.) Date/Time: Received by: (signature CT// B/22/370 Received by: (signature Date/Time: Received by: (signature Date/Time: Received by: (signature	Sampler(s) [print name(s)-sign below]:		I = I = I = I X Wastewater Effluent	$7 - 14 - 2 \sum 7_{Am} - 4_{pm} \times W$ astewater Effluent		illed/iced Yes No
Report to: Phone: P.O.#: Bill to:	Fren	for a	X			Record Analysis / Preservative
Jeremy Baughman Material Handling Exchange, Inc. 1800 Churchman Ave Indianapolis, IN 46203	Frenquency = 1/month TTO = 1/6months	for a total of <u>S</u> hours	60 minutes 77 797	22	2779 Rockefeller Avenue Cleveland, Ohio 44115 Phone:(216)696-0280 Fax:(216)696-6831	Water & Wastewater Laboratories, Inc.



WATER & WASTEWATER LABORATORIES, INC.

Client: Material Handling Exchange, Inc. Address: 1800 Churchman Ave Indianapolis, IN 46203 Attention: Jonathan Amato

Report Date: August 4, 2022

P.O. #: verbal

page 1 of 2

Column #	Sample Description	Sample Date	Recd. Date	Sample #
#1	Wastewater Effluent Composite	7/26/22	7/28/22	22-3132
#2	Wastewater Effluent Grab	7/26/22	7/28/22	22-3133
#3				

Parameter	#1	#2	#3	Units	Method	PQL
Total Metals				-	200.2	
Cadmium	<0.005	_		mg/L	200.7	0.005
Chromium, total	<0.01	_		mg/L	200.7	0.01
Copper	0.07	-		mg/L	200.7	0.01
Lead	<0.01	-		mg/L	200.7	0.01
Nickel	<0.01	-		mg/L	200.7	0.01
Silver	<0.005	-		mg/L	200.7	0.005
Zinc	0.02	-		mg/L	200.7	0.01
Total Cyanide	-	<0.01		mg/L	4500CN C/E	0.01
						11 IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII

Unit Desc:

mg/L = milligrams per liter (ppm), ug/L = micrograms per liter (ppb), mg/Kg = milligrams per Kilograms (ppm) Std = Standard pH units, ng/L = nanograms per liter (ppt), ND= not detected, below the Practical Quantitation Limit-PQL) < = less than (not detected, below listed value), > = greater than (higher than listed value)

Jøhn Ondo

Laboratory Manager

Analysis Certified By:



Client: Material Handling Exchange, Inc. Address: 1800 Churchman Ave Indianapolis, IN 46203 Attention: Jonathan Amato

Report Date: August 4, 2022

P.O. #:	verbal
	page 2 of 2

Column #	Sample Description	Sample Date	Recd. Date	Sample #
#1	Wastewater Effluent Composite	7/26/22	7/28/22	22-3132
#2	Wastewater Effluent Grab	7/26/22	7/28/22	22-3133
#3				

		Method	Matrix Spike	Matrix D	uplicate				
Analytical Batch QA/QC Data	LCS % recovery	Blank mg/L	(MS) % recovery	Spike (MSD) % recovery	Sample (Dup) % Deviation	PQL	Test Method	Analyst	Date Analyzed
Total Metals						-	200.2	RK	7/29/2022
Cadmium	98	ND	99	-	0	0.005	200.7	RK	7/30/2022
Chromium, total	92	ND	92	-	0	0.01	200.7	RK	7/30/2022
Copper	100	ND	100	-	0	0.01	200.7	RK	7/30/2022
Lead	96	ND	92	-	0	0.01	200.7	RK	7/30/2022
Nickel	96	ND	90	-	0	0.01	200.7	RK	7/30/2022
Silver	95	ND	100		0	0.005	200.7	RK	7/30/2022
Zinc	101	ND	96	-	7	0.01	200.7	RK	7/30/2022
Total Cyanide	98	ND	95		0	0.01	4500CN C/E	RK	8/3/2022
				1					
1					1 				
		1							1

Unit Desc: mg/L = milligrams per liter (ppm), ppm = parts per million

ND= not detected, below the Practical Quantitation Limit-PQL), < = less than (not detected, below listed value)

Analysis Certified By: Laboratory Manager John Ondo

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			Bill to:	utper U	ature or s	Keceived by: (signature or sappe	wate/11me: Ke			(signature)	Notifiquiation by: (signature)
			Fax:	my	NA	K I	22		Ì	, C	
			Phone:	HILL (applied	ature or s	Received by: (signature or s.	Date/Tinke: Re		2	: (sighature)	Relinquished by: (signature)
		1800 Churchman Ave Indianapolis, IN 46203		Wildw LA		Deceived by (signed	148 total 2000	y K	aure)	Simpler Agu	Manual Contract
	Inc.	Material Handling Exchange, Inc.				0	5		ghnen	1 Daugh	Scrow
		Report to: Jeremy Baughman	Report	NC	~ /				w]:	name(s)-sign belo	Sampler(s) [print name(s)-sign below]
		TTO = 1/6months									
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	(for a total of \mathcal{S} hours			1						
W	2.3	<u>(c</u>) minutes		×			Wastewater Effluent	-	X	11 Am	7-26-22 11 Am
3	2:3	For Composite: a sample was collected every			x		Wastewater Effluent	Wastewa	X	7 TAM 3pm	7-26-22 7Am 3pm
;#	Lab #	Sample Comments		Plastic 8c Total Cya			Sample Location/site ID	d	Comp. Grab	Sample Time	Sample Date
		Phone:(216)696-0280 Fax:(216)696-6831		z w/NaO mide	z w/HNO3	per of Cc	Project Name:		N 46131	Franklin, IN 46131	
	\mathbb{N}	Cleveland, Ohio 44115		Н		ontair	Temp (C):		cane Road	1001 Hurricane Road	Site Address:
Inc.	ratories,	Water & Wastewater Laboratories, Inc.	vative	Analysis / Preservative		No	^{IC.} Sample chilled/iced $\sum_{i=1}^{N_{es}}$	change, In	Material Handling Exchange, Inc.	Material H	Site Name:
		-		Treets							

Sample Chain of Custody Record

INSTRUCTIONS FOR MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS (State Form 30530)

There are three (3) pages to the form, each on a separate sheet (see tabs at bottom). You can specify "Print what: Entire Workbook" under the menu File > Print... to print all three (3) pages and these instructions. Or print each page individually (you must have the page "open" when printing it).

General information (Facility Name, Permit Number, etc.) should be entered into the top box on the first page. This information will then show up on subsequent pages of the MMR automatically.

If the is no discharge for the month, simply put an X in the box next to "No Discharge" on page 1.

Round off the calculated numbers as appropriate when transferring the information to your DMR.

Please revise the page numbering as appropriate (eg "Page 1 of 1", etc.). If you wish to use what we've provided as "Page 3" as your first or second page, just change the page info at the bottom.

Detailed information and an example of how to fill out the form is available on our web site at http://www.in.gov/idem/5157.htm#owq_wastewater .

If only one pH sample is taken per day, either column (Hi or Low) may be used.

Many of the cells containing formulas are "locked" to prevent accidental modification.

Should you find it necessary to remove the cell protection, the password is "mmr".

Should you need to have a geometric mean (rather than an average) calculated, you may unlock the form and change the formula wording in the appropriate cell from "average" to "geomean".

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submittir	ng false i	informat	tion, incl	luding the I					(or attested by NetDMR subscriber agreement) Jon Amato 9/6/2022												
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THE STATE OF B	MONTHLY MC Indiana Discha State Form 30530 (F	rge Monito R3 / 3-14)			OR INDUST	FRIAL DIS	CHARGE	PERMITS		
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to the best of my knowled	•				al executive offi		ed agent	Date (month, day, year)		
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CHARTER OF THE STATE OF	Indiana Disch State Form 30530	arge Monito (R3 / 3-14)						AL DISCHARGE PERMITS MPLETE AND SUBMIT ONE COPY EACH MONTH. RT MUST BE POSTMARKED NO LATER THAN THE						
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the possibility of fine and	d imprisonment for kno	wing violations.				Jon An	nato					9/6/2	022	

INSTRUCTIONS FOR MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS (State Form 30530)

There are three (3) pages to the form, each on a separate sheet (see tabs at bottom). You can specify "Print what: Entire Workbook" under the menu File > Print... to print all three (3) pages and these instructions. Or print each page individually (you must have the page "open" when printing it).

General information (Facility Name, Permit Number, etc.) should be entered into the top box on the first page. This information will then show up on subsequent pages of the MMR automatically.

If the is no discharge for the month, simply put an X in the box next to "No Discharge" on page 1.

Round off the calculated numbers as appropriate when transferring the information to your DMR.

Please revise the page numbering as appropriate (eg "Page 1 of 1", etc.). If you wish to use what we've provided as "Page 3" as your first or second page, just change the page info at the bottom.

Detailed information and an example of how to fill out the form is available on our web site at http://www.in.gov/idem/5157.htm#owq_wastewater .

If only one pH sample is taken per day, either column (Hi or Low) may be used.

Many of the cells containing formulas are "locked" to prevent accidental modification.

Should you find it necessary to remove the cell protection, the password is "mmr".

Should you need to have a geometric mean (rather than an average) calculated, you may unlock the form and change the formula wording in the appropriate cell from "average" to "geomean".

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THE STATE OF	MONTHLY MC Indiana Discha				MMR) FC			CHARGE F	PERMITS	
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to the best of my knowle	dge and belief, true, acc	urate, and comple				l executive offi	ed agent	Date (month, day, year)		
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knowing violations.	,, <u>.</u>					jon ama	ato		9/6/	2022

	MONTHLY MONITORING REPORT (MMR) FOR Indiana Discharge Monitoring Report State Form 30530 (R3 / 3-14) FACILITY NAME AND ADDRESS: Material Handling Exchange, Inc.					PLEAS	INDUSTRIAL DISCHARGE PERMITS PLEASE COMPLETE AND SUBMIT ONE COPY EACH MONTH. THIS REPORT MUST BE POSTMARKED NO LATER THAN THE				
/816	1001 Hurricane Stree							BE POSTMARKE WING MONTH.	D NO LATER IN	IAN THE	
	Franklin, Indiana					Mail To	Mail To: Indiana Department of Environmental Management Office of Water Quality, Mail Code 65-42 100 North Senate Avenue Indianapolis, Indiana 46204-2251				
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I certify under penalty of were prepared under my									7/14/2022		
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the possibility of fine and	d imprisonment for know	ving violations.	,			jon ama	ato	9/6/2022			