

DMR Copy of Record

Permit

Permit #:INP000627

Major:No

Permitted Feature:001
External Outfall

Permittee:MATERIAL HANDLING EXCHANGE, INC.

Permittee Address:1001 HURRICANE ST
FRANKLIN, IN 46131

Discharge:001-A
001 POWDER COAT METAL PARTS - TO FRANKLIN POTW

Facility:MATERIAL HANDLING EXCHANGE, INC.

Facility Location:1001 N HURRICANE ST
FRANKLIN, IN 46131

Report Dates & Status

Monitoring Period:From 12/01/22 to 12/31/22

DMR Due Date:01/28/23

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:Joe

Last Name:Amato

Title:operations manager

Telephone:317-361-6434

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						=	6.95			=	7.25	12 - SU		01/01 - Daily	GR - GRAB
					Permit Req.						>=	5.0 DAILY MN			<=	10.0 DAILY MX	12 - SU		01/01 - Daily	GR - GRAB
					Value NODI															
00720	Cyanide, total [as CN]	1 - Effluent Gross	0	--	Sample								<	0.01	<	0.01	19 - mg/L		01/30 - Monthly	GR - GRAB
					Permit Req.								<=	0.02 MO AVG	<=	0.02 DAILY MX	19 - mg/L		01/30 - Monthly	GR - GRAB
					Value NODI															
01074	Nickel, total recoverable	1 - Effluent Gross	0	--	Sample								=	0.02	=	0.02	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	1.6 MO AVG	<=	1.6 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
01079	Silver total recoverable	1 - Effluent Gross	0	--	Sample								=	0.005	=	0.005	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	0.24 MO AVG	<=	0.43 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
01094	Zinc, total recoverable	1 - Effluent Gross	0	--	Sample								=	0.02	=	0.02	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	1.48 MO AVG	<=	2.0 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
01113	Cadmium, total recoverable	1 - Effluent Gross	0	--	Sample								<	0.005	<	0.005	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	0.07 MO AVG	<=	0.11 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
01114	Lead, total recoverable	1 - Effluent Gross	0	--	Sample								<	0.01	<	0.01	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	0.13 MO AVG	<=	0.13 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
01118	Chromium, total recoverable	1 - Effluent Gross	0	--	Sample								<	0.01	<	0.01	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	1.71 MO AVG	<=	2.77 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
01119	Copper, total recoverable	1 - Effluent Gross	0	--	Sample								=	0.06	=	0.06	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	0.31 MO AVG	<=	0.31 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0	--	Sample	=	0.00559176	=	0.007207	03 - MGD									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
------	------	------

Analytical_20221212_142639.pdf		pdf	1174344.0
INP000627_001A_MMR_2022_12.pdf		pdf	380801.0
Report Last Saved By			
MATERIAL HANDLING EXCHANGE, INC.			
User:	HSSTOOLROOM		
Name:	Jeremy Baughman		
E-Mail:	hsstool@m-h-e.com		
Date/Time:	2023-01-04 13:23 (Time Zone: -05:00)		
Report Last Signed By			
User:	HSSTOOLROOM		
Name:	Jeremy Baughman		
E-Mail:	hsstool@m-h-e.com		
Date/Time:	2023-01-04 13:23 (Time Zone: -05:00)		

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INP000627

Major:

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MATERIAL HANDLING EXCHANGE, INC.

Permittee Address:

1001 HURRICANE ST
FRANKLIN, IN 46131

Facility:

MATERIAL HANDLING EXCHANGE, INC.

Facility Location:

1001 N HURRICANE ST
FRANKLIN, IN 46131

Permitted Feature:

001
External Outfall

Discharge:

001-AS
001 SEMIANNUAL TTO

Report Dates & Status

Monitoring Period:

From 09/01/22 to 12/31/22

DMR Due Date:

01/28/23

Status:

NetDMR Validated

Considerations for Form Completion

SEMIANNUAL TTO REPORTING PRETREATMENT TO FRANKLIN POTW, JOHNSON COUNTY

Principal Executive Officer

First Name:

Joe

Last Name:

Amato

Title:

operations manager

Telephone:

317-361-6434

No Data Indicator (NODI)

Form NODI:

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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

None Detected

Attachments

Name	Type	Size
Analytical_20230116_135035.pdf	pdf	2109838.0
INP000627_001A_MMR_2023_1.pdf	pdf	380736.0

Report Last Saved By

MATERIAL HANDLING EXCHANGE, INC.

User:

HSSTOOLROOM

Name:

Jeremy Baughman

E-Mail:

hsstool@m-h-e.com

Date/Time:

2023-02-03 07:16 (Time Zone: -05:00)

Report Last Signed By

User:

HSSTOOLROOM

Name:

Jeremy Baughman

E-Mail:

hsstool@m-h-e.com

Date/Time:

2023-02-03 07:17 (Time Zone: -05:00)

DMR Copy of Record

Permit

Permit #:

INP000627

Major:

No

Permittee:

MATERIAL HANDLING EXCHANGE, INC.

Permittee Address:

1001 HURRICANE ST
FRANKLIN, IN 46131

Facility:

MATERIAL HANDLING EXCHANGE, INC.

Facility Location:

1001 N HURRICANE ST
FRANKLIN, IN 46131

Permitted Feature:

002
External Outfall

Discharge:

002-A
002 POWDER COAT METAL PARTS - TO FRANKLIN POTW

Report Dates & Status

Monitoring Period:

From 12/01/22 to 12/31/22

DMR Due Date:

01/28/23

Status:

NetDMR Validated

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Form NODI:

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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_002A_MMR_2022_12.pdf		pdf	376637.0
Analytical_20221212_142639.pdf		pdf	1174344.0
Report Last Saved By			
MATERIAL HANDLING EXCHANGE, INC.			
User:	HSSTOOLROOM		
Name:	Jeremy Baughman		
E-Mail:	hsstool@m-h-e.com		
Date/Time:	2023-01-04 13:06 (Time Zone: -05:00)		
Report Last Signed By			
User:	HSSTOOLROOM		
Name:	Jeremy Baughman		
E-Mail:	hsstool@m-h-e.com		
Date/Time:	2023-01-04 13:07 (Time Zone: -05:00)		

DMR Copy of Record

Permit

Permit #:

INP000627

Major:

No

Permittee:

MATERIAL HANDLING EXCHANGE, INC.

Permittee Address:

1001 HURRICANE ST
FRANKLIN, IN 46131

Facility:

MATERIAL HANDLING EXCHANGE, INC.

Facility Location:

1001 N HURRICANE ST
FRANKLIN, IN 46131

Permitted Feature:

002
External Outfall

Discharge:

002-AS
002 SEMIANNUAL TTO

Report Dates & Status

Monitoring Period:

From 09/01/22 to 12/31/22

DMR Due Date:

01/28/23

Status:

NetDMR Validated

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Last Name:

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operations manager

Telephone:

317-361-6434

No Data Indicator (NODI)

Form NODI:

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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_002A_MMR_2023_1.pdf	pdf	376609.0
Analytical_20230116_135035.pdf	pdf	2109838.0

Report Last Saved By

MATERIAL HANDLING EXCHANGE, INC.

User:

HSSTOOLROOM

Name:

Jeremy Baughman

E-Mail:

hsstool@m-h-e.com

Date/Time:

2023-02-03 07:23 (Time Zone: -05:00)

Report Last Signed By

User:

HSSTOOLROOM

Name:

Jeremy Baughman

E-Mail:

hsstool@m-h-e.com

Date/Time:

2023-02-03 07:24 (Time Zone: -05:00)

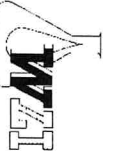


page 1 of 2



page 2 of 2

Sample Chain of Custody Record

Site Name: Material Handling Exchange, Inc.		Sample chilled/iced <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Water & Wastewater Laboratories, Inc. 2779 Rockefeller Avenue Cleveland, Ohio 44115 Phone: (216) 696-0280 Fax: (216) 696-6831 					
Site Address: 1001 Hurricane Road Franklin, IN 46131		Temp (C): 160 Project Name: 160							
Sample Date	Sample Time	Comp.	Grab	Sample Location/site ID	Number of Containers	Analysis / Preservative	Sample Comments	Lab #	
12-01-22	7am-3pm	X		Wastewater Effluent	1	Plastic 8oz w/HNO3 7 Metals			
12-01-22	11am		X	Wastewater Effluent	1	Plastic 8oz w/NaOH Total Cyanide			
							For Composite: a sample was collected every 60 minutes for a total of 8 hours		
							Frequency = 1/month		
							TTO = 1/6months		
Sampler(s) [print name(s)-sign below]: Anna Corrie					Report to: Jeremy Baughman				
Relinquished by: (sampler signature) Anna Corrie		Date/Time:		Received by: (signature or shipper)		Material Handling Exchange, Inc. 1800 Churchman Ave Indianapolis, IN 46203			
Relinquished by: (signature) UHS		Date/Time: 12/05/22 1405		Received by: (signature or shipper)		Phone:			
Relinquished by: (signature)		Date/Time:		Received by: (signature or shipper)		Fax:			
Relinquished by: (signature)		Date/Time:		Received by: (signature or shipper)		P.O.#:			
Relinquished by: (signature)		Date/Time:		Received by: (signature or shipper)		Bill to:			



MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

State Form 30530 (R4 / 7-19)

FACILITY NAME AND ADDRESS:

Material Handling Exchange, Inc.
1001 Hurricane Street
Franklin Indiana 46131

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: hsstool@m-h-e.com

I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	1	
OUTFALL NO.			

1	2	2	2
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	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		Comp		Comp				
	Monitored	24TOT	Grab		Grab		Comp		Comp				
FREQUENCY	Permit Condition	Daily	Meter		Monthly		Monthly		Monthly				
	Monitored	Daily	Daily		Monthly		Monthly		Monthly				
EFFLUENT LIMITATIONS	Permit Minimum	N/A	5.0		N/A		N/A		N/A				
	Permit Average	Report	N/A		0.02		1.60		0.24				
	Permit Maximum	Report	10.0		0.02		1.60		0.43				
UNITS =		MGD	HI	LOW	LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L
Thu 1		0.005097	7.09		0.00042534	<	0.01	0.00085069		0.02	0.00021267	<	0.005
Fri 2		0.004318	7.25										
Sat 3		N/A	N/A										
Sun 4		N/A	N/A										
Mon 5		0.005256	6.95										
Tue 6		0.006016	7.09										
Wed 7		0.005947	7.12										
Thu 8		0.00279	7.07										
Fri 9		0.004751	7.1										
Sat 10		N/A	N/A										
Sun 11		N/A	N/A										
Mon 12		0.005882	7.25										
Tue 13		0.005889	7.08										
Wed 14		0.006427	7.19										
Thu 15		0.005993	7.12										
Fri 16		0.007207	7.1										
Sat 17		N/A	N/A										
Sun 18		N/A	N/A										
Mon 19		0.00628	7.11										
Tue 20		0.006089	7.08										
Wed 21		0.006824	7.1										
Thu 22		0.005683	7.11										
Fri 23		0.003466	7.09										
Sat 24		N/A	N/A										
Sun 25		N/A	N/A										
Mon 26		N/A	N/A										
Tue 27		0.004951	7.07										
Wed 28		0.006486	7.08										
Thu 29		0.006189	6.95										
Fri 30		0.005886	7.07										
Sat 31		N/A	N/A										
MONTHLY AVERAGE		0.00559176			0.00042534		0.01	0.00085069		0.02	0.00021267		0.005
HIGHEST VALUE		0.007207	7.25		0.00042534		0.01	0.00085069		0.02	0.00021267		0.005
LOWEST VALUE		0.00279	6.95		0.00042534		0.01	0.00085069		0.02	0.00021267		0.005
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED													

TOTAL FLOW 0.117427

Prepared by or under the direction of (Certified Operator):

Date (month, day, year)

12/1/2022

Preparer's telephone number

Operator's certification number

317-213-0178

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

Date (month, day, year)

Jeremy Baughman

1/4/2023

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.



MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

State Form 30530 (R4 / 7-19)

FACILITY NAME AND ADDRESS:

Material Handling Exchange, Inc.
1001 Hurricane Street
Franklin Indiana 46131

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	6	2	7
PERMIT NUMBER								

0	0	1	
OUTFALL NO.			

1	2	2	2
MO.		YR.	

No Discharge

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

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		Comp			Comp			Comp			Comp	
	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			0.13			1.71	
	Permit Maximum		2.0			0.11			0.13			2.77	
UNITS=		LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L
	Thu 1	0.00085069		0.02	0.00021267	<	0.005	0.00042534	<	0.01	0.00042534	<	0.01
	Fri 2												
	Sat 3												
	Sun 4												
	Mon 5												
	Tue 6												
	Wed 7												
	Thu 8												
	Fri 9												
	Sat 10												
	Sun 11												
	Mon 12												
	Tue 13												
	Wed 14												
	Thu 15												
	Fri 16												
	Sat 17												
	Sun 18												
	Mon 19												
	Tue 20												
	Wed 21												
	Thu 22												
	Fri 23												
	Sat 24												
	Sun 25												
	Mon 26												
	Tue 27												
	Wed 28												
	Thu 29												
	Fri 30												
	Sat 31												
MONTHLY AVERAGE		0.00085069		0.02	0.00021267		0.005	0.00042534		0.01	0.00042534		0.01
HIGHEST VALUE		0.00085069		0.02	0.00021267		0.005	0.00042534		0.01	0.00042534		0.01
LOWEST VALUE		0.00085069		0.02	0.00021267		0.005	0.00042534		0.01	0.00042534		0.01
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):

Date (month, day, year)

12/1/2022

Preparer's telephone number

Operator's certification number

317-213-0178

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

Jeremy Baughman

Date (month, day, year)



MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

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(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	6	2	7
PERMIT NUMBER								

0	0	1	
OUTFALL NO.			

1	2	2	2
MO.		YR.	

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

No Discharge ☐
This is a revised submittal. ☐

EFFLUENT CHARACTERISTICS		Copper [Cu]		TTO						
EFFLUENT PARAMETER NUMBER		Q	C01119	Q	C78141	Q	C	Q	C	
SAMPLE TYPE	Permit Condition		Comp		Grab					
	Monitored		Comp		Grab					
FREQUENCY	Permit Condition		Monthly		2X/Year					
	Monitored		Monthly		2X/Year					
EFFLUENT LIMITATIONS	Permit Minimum		N/A		N/A					
	Permit Average		0.31		N/A					
	Permit Maximum		0.31		2.00					
UNITS=		LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L
	Thu 1	0.00255207		0.06						
	Fri 2									
	Sat 3									
	Sun 4									
	Mon 5									
	Tue 6									
	Wed 7									
	Thu 8									
	Fri 9									
	Sat 10									
	Sun 11									
	Mon 12									
	Tue 13									
	Wed 14									
	Thu 15									
	Fri 16									
	Sat 17									
	Sun 18									
	Mon 19									
	Tue 20									
	Wed 21									
	Thu 22									
	Fri 23									
	Sat 24									
	Sun 25									
	Mon 26									
	Tue 27									
	Wed 28									
	Thu 29									
	Fri 30									
	Sat 31									
MONTHLY AVERAGE		0.00255207		0.06						
HIGHEST VALUE		0.00255207		0.06						
LOWEST VALUE		0.00255207		0.06						
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):

Date (month, day, year)

12/1/2022

Preparer's telephone number

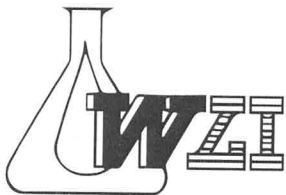
Operator's certification number

317-213-0178

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

Jeremy Baughman

Date (month, day, year)



WATER & WASTEWATER LABORATORIES, INC.

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

Report Date: January 16, 2023
 P.O. #: verbal

Page 1 of 4

Column #	Sample Description	Sample Date	Recd. Date	Sample #
#1	Wastewater Effluent Composite	1/4/2023	1/6/23	23-0108
#2	Wastewater Effluent Grab	1/4/2023	1/6/23	23-0109
#3				

Total Toxic Organics(TTO)

Volatiles	Result #1	Result #2	Result #3	Detection Limit (PQL)
Acrolein	-	ND		50
Acrylonitrile	-	ND		10
Benzene	-	ND		1
Bromodichloromethane	-	ND		1
Bromoform	-	ND		1
Bromomethane	-	ND		10
Carbon Tetrachloride	-	ND		1
Chlorobenzene	-	ND		1
Chloroethane	-	ND		5
2-Chloroethyl vinyl ether	-	ND		40
Chloroform	-	ND		1
Chloromethane	-	ND		1
Dibromochloromethane	-	ND		1
1,1-Dichloroethane	-	ND		1
1,2-Dichloroethane	-	ND		1
1,1-Dichloroethene	-	ND		1
trans-1,2-Dichloroethene	-	ND		1
1,2-Dichloropropane	-	ND		1
1,3-Dichloropropane	-	ND		1
1,3-Dichloropropene, cis	-	ND		1
1,3-Dichloropropene, trans	-	ND		1
Ethylbenzene	-	ND		1
Methylene Chloride	-	ND		10
1,1,2,2-Tetrachloroethane	-	ND		3
Tetrachloroethene	-	ND		1
Toluene	-	ND		1
1,1,1-Trichloroethane	-	ND		1
1,1,2-Trichloroethane	-	ND		2
Trichloroethylene	-	ND		1
Vinyl Chloride	-	ND		5
Semivolatile (acids)				
4-chloro-3-methylphenol	ND	-		10
2-chlorophenol	ND	-		10
2,4-dichlorophenol	ND	-		10
2,4-dimethylphenol	ND	-		10
2,4-dinitrophenol	ND	-		10
2-methyl-4,6-dinitrophenol	ND	-		10
Units	ug/L	ug/L	ug/L	ug/L

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#1	Wastewater Effluent Composite	1/4/2023	01/06/23	23-0108
#2	Wastewater Effluent Grab	1/4/2023	01/06/23	23-0109
#3				

Total Toxic Organics(TTO)

Semivolatile (acids)	Result #1	Result #2	Result #3	Detection Limit(PQL)
2-nitrophenol	ND	-		10
4-nitrophenol	ND	-		10
pentachlorophenol	ND	-		10
phenol	ND	-		10
2,4,6-trichlorophenol	ND	-		10
Semivolatile (base neutral)				
Acenaphthene	ND	-		10
Acenaphthylene	ND	-		10
Anthracene	ND	-		10
Benzidine	ND	-		10
benzo[a]anthracene	ND	-		10
benzo[a]pyrene	ND	-		10
benzo[b]fluoranthene	ND	-		10
benzo[ghi]perylene	ND	-		10
benzo[k]fluoranthene	ND	-		10
bis(2-chloroethoxy)methane	ND	-		10
bis(2-chloroethyl)ether	ND	-		10
bis(2-chloroisopropyl)ether	ND	-		10
bis(2-ethylhexyl)phthalate	ND	-		10
4-bromophenyl phenyl ether	ND	-		10
butylbenzyl phthalate	ND	-		10
2-chloronaphthalene	ND	-		10
4-chlorophenyl phenyl ether	ND	-		10
chrysene	ND	-		10
dibenz[a,h]anthracene	ND	-		10
1,2-dichlorobenzene	ND	-		10
1,3-dichlorobenzene	ND	-		10
1,4-dichlorobenzene	ND	-		10
3,3-Dichlorobenzidine	ND	-		20
2,4-dinitrotoluene	ND	-		10
2,6-dinitrotoluene	ND	-		10
diethyl phthalate	ND	-		10
dimethyl phthalate	ND	-		10
di-n-butyl phthalate	ND	-		10
di-n-octyl phthalate	ND	-		10
1,2-Diphenylhydrazine	ND	-		10
fluoranthene	ND	-		10
fluorene	ND	-		10
hexachlorobenzene	ND	-		10
hexachlorobutadiene	ND	-		10
hexachlorocyclopentadiene	ND	-		10
hexachloroethane	ND	-		10
Units	ug/L	ug/L	ug/L	ug/L

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#2	Wastewater Effluent Grab	1/4/2023	01/06/23	23-0109
#3				

Total Toxic Organics(TTO)

<u>Semivolatile (base neutral)</u>	<u>Result #1</u>	<u>Result #2</u>	<u>Result #3</u>	<u>Detection Limit(PQL)</u>
indeno[1,2,3-cd]pyrene	ND	-		10
isophorone	ND	-		10
naphthalene	ND	-		10
nitrobenzene	ND	-		10
N-nitrosodimethylamine	ND	-		10
N-nitrosodi-n-propylamine	ND	-		10
N-Nitrosodiphenylamine	ND	-		10
phenanthrene	ND	-		10
pyrene	ND	-		10
1,2,4-trichlorobenzene	ND	-		10

Pesticides

Aldrin	ND	-		1
Alpha-BHC	ND	-		1
Beta-BHC	ND	-		1
Delta-BHC	ND	-		1
Gamma-BHC	ND	-		1
Chlordane	ND	-		5
4,4-DDT	ND	-		1
4,4-DDE	ND	-		1
4,4-DDD	ND	-		1
Dieldrin	ND	-		1
Alpha endosulfan	ND	-		1
Beta endosulfan	ND	-		1
Endosulfan sulfate	ND	-		1
Endrin	ND	-		1
Endrin aldehyde	ND	-		1
Heptachlor	ND	-		1
Heptachlor epoxide	ND	-		1
Toxaphene	ND	-		5

Polychlorinated biphenyls(PCB's)

Aroclor-1016	ND	-		3
Aroclor-1221	ND	-		3
Aroclor-1232	ND	-		3
Aroclor-1242	ND	-		3
Aroclor-1248	ND	-		3
Aroclor-1254	ND	-		3
Aroclor-1260	ND	-		3

Dioxin

2,3,7,8-Tetrachloro-dibenzo-p-dioxin	NEG	-		10
Units	ug/L	ug/L	ug/L	ug/L

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#3				

Summation of all TTO's found	TTO Result	units	Limit (413,433,469)
Total Toxic Organics (TTO) =	ND	ug/L	2130

QA/QC Data	Sample QC #1 % Recovery	Sample QC #2 % Recovery	Sample QC #3 % Recovery	Acceptable Recovery
Surrogates Volatiles				
Dibromofluoromethane	-	91		82-132
1,2-Dichloroethane-d4	-	106		86-117
Toluene-d8	-	95		42-170
4-Bromofluorobenzene	-	105		62-129
Analyst:		PM		
Date Analyzed:		1/7/23		
Surrogates Semivolatiles				
2-Fluorophenol	74	-		35-118
Phenol-d6	77	-		25-114
2-Chlorophenol-d4	78	-		19-122
2,4,6-Tribromophenol	109	-		64-148
1,2-Dichlorobenzene-d4	64	-		21-115
Nitrobenzene-d5	72	-		29-122
2-Fluorobiphenyl	74	-		37-124
p-Terphenyl-d14	107	-		29-129
Analyst:	PM			
Date Prepared:	1/8/23			
Analyst:	PM			
Date Analyzed:	1/13/23			
Surrogates PCB/Pesticides				
Decachlorobiphenyl	3	-		10-180
Tetrachloro-m-xylene	7	-		10-124
Analyst:	JO			
Date Prepared:	1/11/23			
Analyst:	JO			
Date Analyzed:	1/12/23			

ND = Not Detected (Concentration is below the Practical Quantitation Level - PQL)
Analytical Method: EPA 624.1 ,625,608

ug/L = micrograms per Liter (ppb)
mg/L = milligrams per Liter (ppm)
mg/Kg = milligrams per Kilograms (ppm)

Analysis Certified By: _____ Laboratory Manager

John Ondo

Sample Chain of Custody Record

Site Name: Material Handling Exchange, Inc.		Sample chilled/iced <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Water & Wastewater Laboratories, Inc.	
Site Address: 1800 Churchman Ave Indianapolis, IN 46203		Temp (C): 40 Project Name:		2779 Rockefeller Avenue Cleveland, Ohio 44115 Phone: (216) 696-0280 Fax: (216) 696-6831	
Sample Date	Sample Time	Comp. Grab	Sample Location/site ID	Number of Containers	Analysis / Preservative
1-4-23	8-4	X	Wastewater Effluent	2	2X
1-4-23	12pm	X	Wastewater Effluent	2	2X
<p>For Composite: a sample was collected every 10 minutes for a total of 8 hours</p> <p>23-0108</p> <p>23-0109</p>					
TTO = 1/6 months					
Sampler(s) [print name(s)-sign below]: Anna Corrie			Report to: Nick Lawrence		
Relinquished by: (sampler signature) Anna Corrie		Date/Time:		Material Handling Exchange, Inc. 1800 Churchman Ave Indianapolis, IN 46203	
Relinquished by: (signature) [Signature]		Date/Time: 01/06/23 1400		Phone:	
Relinquished by: (signature)		Date/Time:		Fax:	
Relinquished by: (signature)		Date/Time:		P.O.#:	
Relinquished by: (signature)		Date/Time:		Bill to:	
Received by: (signature or shipper) [Signature]		Received by: (signature or shipper) [Signature]		Sample Comments	
Received by: (signature or shipper)		Received by: (signature or shipper)		Lab #	



MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

State Form 30530 (R4 / 7-19)

FACILITY NAME AND ADDRESS:

Material Handling Exchange, Inc.
1001 Hurricane Street
Franklin Indiana 46131

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: hsstool@m-h-e.com

I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	1	
OUTFALL NO.			

0	1	2	3
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		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		Comp		Comp				
	Monitored	24TOT	Grab			Grab		Comp		Comp				
FREQUENCY	Permit Condition	Daily	Meter			Monthly		Monthly		Monthly				
	Monitored	Daily	Daily			Monthly		Monthly		Monthly				
EFFLUENT LIMITATIONS	Permit Minimum	N/A	5.0			N/A		N/A		N/A				
	Permit Average	Report	N/A			0.02		1.60		0.24				
	Permit Maximum	Report	10.0			0.02		1.60		0.43				
UNITS =		MGD	HI	LOW	LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L	
Sun 1		N/A	N/A											
Mon 2		N/A	N/A											
Tue 3		0.006014	7.22											
Wed 4		0.006709	7.16			0.00055987	<	0.01	0.00111973		0.02	0.00027993	<	0.005
Thu 5		0.005735	7.05											
Fri 6		0.004531	7.13											
Sat 7		N/A	N/A											
Sun 8		N/A	N/A											
Mon 9		0.005059	7.11											
Tue 10		0.00616	7.11											
Wed 11		0.005521	7.04											
Thu 12		0.002865	7											
Fri 13		0.003794	7.05											
Sat 14		N/A	N/A											
Sun 15		N/A	N/A											
Mon 16		0.007395	6.5											
Tue 17		0.006879	7.04											
Wed 18		0.006422	6.97											
Thu 19		0.007155	7.01											
Fri 20		0.008004	7											
Sat 21		N/A	N/A											
Sun 22		N/A	N/A											
Mon 23		0.010035	7.15											
Tue 24		0.00691	6.93											
Wed 25		0.008016	7.05											
Thu 26		0.007646	7.27											
Fri 27		0.007432	7.19											
Sat 28		N/A	N/A											
Sun 29		N/A	N/A											
Mon 30		0.010459	7.14											
Tue 31		0.006209	7.12											
MONTHLY AVERAGE		0.00661667				0.00055987		0.01	0.00111973		0.02	0.00027993		0.005
HIGHEST VALUE		0.010459	7.27			0.00055987		0.01	0.00111973		0.02	0.00027993		0.005
LOWEST VALUE		0.002865	6.5			0.00055987		0.01	0.00111973		0.02	0.00027993		0.005
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED														

TOTAL FLOW 0.13895

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):		Date (month, day, year)
		1/4/2023
Preparer's telephone number		Operator's certification number
317-213-0178		
Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement)		Date (month, day, year)
Jeremy Baughman		2/3/2023



MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

State Form 30530 (R4 / 7-19)

FACILITY NAME AND ADDRESS:

Material Handling Exchange, Inc.
1001 Hurricane Street
Franklin Indiana 46131

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	6	2	7
PERMIT NUMBER								

0	0	1	
OUTFALL NO.			

0	1	2	3
MO.		YR.	

No Discharge

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

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		Comp			Comp			Comp			Comp	
	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			0.13			1.71	
	Permit Maximum		2.0			0.11			0.13			2.77	
UNITS=		LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L
	Sun 1												
	Mon 2												
	Tue 3												
	Wed 4	0.00223946		0.04	0.00027993	<	0.005	0.00055987	<	0.01	0.00055987	<	0.01
	Thu 5												
	Fri 6												
	Sat 7												
	Sun 8												
	Mon 9												
	Tue 10												
	Wed 11												
	Thu 12												
	Fri 13												
	Sat 14												
	Sun 15												
	Mon 16												
	Tue 17												
	Wed 18												
	Thu 19												
	Fri 20												
	Sat 21												
	Sun 22												
	Mon 23												
	Tue 24												
	Wed 25												
	Thu 26												
	Fri 27												
	Sat 28												
	Sun 29												
	Mon 30												
	Tue 31												
MONTHLY AVERAGE		0.00223946		0.04	0.00027993		0.005	0.00055987		0.01	0.00055987		0.01
HIGHEST VALUE		0.00223946		0.04	0.00027993		0.005	0.00055987		0.01	0.00055987		0.01
LOWEST VALUE		0.00223946		0.04	0.00027993		0.005	0.00055987		0.01	0.00055987		0.01
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):

Date (month, day, year)

1/4/2023

Preparer's telephone number

Operator's certification number

317-213-0178

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

Jeremy Baughman

Date (month, day, year)



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0	0	1	
OUTFALL NO.			

0	1	2	3
MO.		YR.	

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

This is a revised submittal.

No Discharge

EFFLUENT CHARACTERISTICS		Copper [Cu]		TTO									
EFFLUENT PARAMETER NUMBER		Q	C01119	Q	C78141	Q	C	Q	C				
SAMPLE TYPE	Permit Condition		Comp		Grab								
	Monitored		Comp		Grab								
FREQUENCY	Permit Condition		Monthly		2X/Year								
	Monitored		Monthly		2X/Year								
EFFLUENT LIMITATIONS	Permit Minimum		N/A		N/A								
	Permit Average		0.31		N/A								
	Permit Maximum		0.31		2.00								
UNITS=		LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L
	Sun 1												
	Mon 2												
	Tue 3												
	Wed 4	0.00447893		0.08		ND							
	Thu 5												
	Fri 6												
	Sat 7												
	Sun 8												
	Mon 9												
	Tue 10												
	Wed 11												
	Thu 12												
	Fri 13												
	Sat 14												
	Sun 15												
	Mon 16												
	Tue 17												
	Wed 18												
	Thu 19												
	Fri 20												
	Sat 21												
	Sun 22												
	Mon 23												
	Tue 24												
	Wed 25												
	Thu 26												
	Fri 27												
	Sat 28												
	Sun 29												
	Mon 30												
	Tue 31												
MONTHLY AVERAGE		0.00447893		0.08									
HIGHEST VALUE		0.00447893		0.08									
LOWEST VALUE		0.00447893		0.08									
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):

Date (month, day, year)

1/4/2023

Preparer's telephone number

Operator's certification number

317-213-0178

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

Jeremy Baughman

Date (month, day, year)



page 1 of 2



page 2 of 2

Sample Chain of Custody Record

Site Name: Material Handling Exchange, Inc.		Sample chilled/iced <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Water & Wastewater Laboratories, Inc. 2779 Rockefeller Avenue Cleveland, Ohio 44115 Phone: (216) 696-0280 Fax: (216) 696-6831				
Site Address: 1001 Hurricane Road Franklin, IN 46131		Temp (C): 160 Project Name: 160						
Sample Date	Sample Time	Comp.	Grab	Sample Location/site ID	Number of Containers	Analysis / Preservative	Sample Comments	Lab #
12-01-22	7am-3pm	X		Wastewater Effluent	1	Plastic 8oz w/HNO3 7 Metals		
12-01-22	11am		X	Wastewater Effluent	1	Plastic 8oz w/NaOH Total Cyanide		
Frequency = 1/month							For Composite: a sample was collected every 60 minutes for a total of 8 hours	22-535
TTO = 1/6months								
Report to: Jeremy Baughman Material Handling Exchange, Inc. 1800 Churchman Ave Indianapolis, IN 46203								
Relinquished by: (signature) <i>Anna Corrie</i> Date/Time: 12/05/22 1405 Received by: (signature or shipper) <i>Jeremy Baughman</i>								
Relinquished by: (signature) <i>UHS</i> Date/Time: 12/05/22 1405 Received by: (signature or shipper) <i>Jeremy Baughman</i>								
Relinquished by: (signature) _____ Date/Time: _____ Received by: (signature or shipper) _____								



MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

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(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: hsstool@m-h-e.com

I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	2
OUTFALL NO.		

1	2	2	2
MO.		YR.	

No Discharge	<input checked="" type="checkbox"/>
--------------	-------------------------------------

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

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		Comp		Comp			
	Monitored	24TOT	Grab			Grab		Comp		Comp			
FREQUENCY	Permit Condition	Daily	Meter			Monthly		Monthly		Monthly			
	Monitored	Daily	Daily			Monthly		Mothly		Monthly			
EFFLUENT LIMITATIONS	Permit Minimum	N/A	5.0			N/A		N/A		N/A			
	Permit Average	Report	N/A			0.02		1.60		0.24			
	Permit Maximum	Report	10.0			0.02		1.60		0.43			
UNITS =		MGD	HI	LOW	LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L
Thu 1													
Fri 2													
Sat 3													
Sun 4													
Mon 5													
Tue 6													
Wed 7													
Thu 8													
Fri 9													
Sat 10													
Sun 11													
Mon 12													
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Thu 29													
Fri 30													
Sat 31													
MONTHLY AVERAGE													
HIGHEST VALUE													
LOWEST VALUE													
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):		Date (month, day, year)
		12/1/2022
Preparer's telephone number		Operator's certification number
317-213-0178		
Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement)		Date (month, day, year)
Jeremy Baughman		1/4/2023



MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

State Form 30530 (R4 / 7-19)

FACILITY NAME AND ADDRESS:

Material Handling Exchange, Inc.
1001 Hurricane Street
Franklin Indiana 46131

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.,
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FOR SUBMITTAL.

I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	2	
OUTFALL NO.			

1	2	2	2
MO.		YR.	

No Discharge ☒

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EFFLUENT CHARACTERISTICS		Zink, 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		Comp			Comp			Comp			Comp	
	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			0.13			1.71	
	Permit Maximum		2.0			0.11			0.13			2.77	
UNITS=		LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L
Thu 1													
Fri 2													
Sat 3													
Sun 4													
Mon 5													
Tue 6													
Wed 7													
Thu 8													
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MONTHLY AVERAGE													
HIGHEST VALUE													
LOWEST VALUE													
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED													

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Prepared by or under the direction of (Certified Operator):

Date (month, day, year)

12/1/2022

Preparer's telephone number

Operator's certification number

317-213-0178

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

Jeremy Baughman

Date (month, day, year)



MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

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I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	2	
OUTFALL NO.			

1	2	2	2
MO.		YR.	

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

No Discharge ☒ This is a revised submittal.

EFFLUENT CHARACTERISTICS		Copper[Cu]		TTO						
EFFLUENT PARAMETER NUMBER		Q	C01119	Q	C78141	Q	C	Q	C	
SAMPLE TYPE	Permit Condition		Comp		Grab					
	Monitored		Comp		Grab					
FREQUENCY	Permit Condition		Monthly		2X/Year					
	Monitored		Monthly		2X/Year					
EFFLUENT LIMITATIONS	Permit Minimum		N/A		N/A					
	Permit Average		0.31		N/A					
	Permit Maximum		0.31		2.00					
UNITS=		LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L
	Thu 1									
	Fri 2									
	Sat 3									
	Sun 4									
	Mon 5									
	Tue 6									
	Wed 7									
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	Sat 31									
MONTHLY AVERAGE										
HIGHEST VALUE										
LOWEST VALUE										
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Date (month, day, year)

12/1/2022

Preparer's telephone number

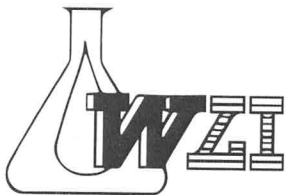
Operator's certification number

317-213-0178

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

Jeremy Baughman

Date (month, day, year)



WATER & WASTEWATER LABORATORIES, INC.

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

Report Date: January 16, 2023
 P.O. #: verbal

Page 1 of 4

Column #	Sample Description	Sample Date	Recd. Date	Sample #
#1	Wastewater Effluent Composite	1/4/2023	1/6/23	23-0108
#2	Wastewater Effluent Grab	1/4/2023	1/6/23	23-0109
#3				

Total Toxic Organics(TTO)

Volatiles	Result #1	Result #2	Result #3	Detection Limit (PQL)
Acrolein	-	ND		50
Acrylonitrile	-	ND		10
Benzene	-	ND		1
Bromodichloromethane	-	ND		1
Bromoform	-	ND		1
Bromomethane	-	ND		10
Carbon Tetrachloride	-	ND		1
Chlorobenzene	-	ND		1
Chloroethane	-	ND		5
2-Chloroethyl vinyl ether	-	ND		40
Chloroform	-	ND		1
Chloromethane	-	ND		1
Dibromochloromethane	-	ND		1
1,1-Dichloroethane	-	ND		1
1,2-Dichloroethane	-	ND		1
1,1-Dichloroethene	-	ND		1
trans-1,2-Dichloroethene	-	ND		1
1,2-Dichloropropane	-	ND		1
1,3-Dichloropropane	-	ND		1
1,3-Dichloropropene, cis	-	ND		1
1,3-Dichloropropene, trans	-	ND		1
Ethylbenzene	-	ND		1
Methylene Chloride	-	ND		10
1,1,2,2-Tetrachloroethane	-	ND		3
Tetrachloroethene	-	ND		1
Toluene	-	ND		1
1,1,1-Trichloroethane	-	ND		1
1,1,2-Trichloroethane	-	ND		2
Trichloroethylene	-	ND		1
Vinyl Chloride	-	ND		5
Semivolatile (acids)				
4-chloro-3-methylphenol	ND	-		10
2-chlorophenol	ND	-		10
2,4-dichlorophenol	ND	-		10
2,4-dimethylphenol	ND	-		10
2,4-dinitrophenol	ND	-		10
2-methyl-4,6-dinitrophenol	ND	-		10
Units	ug/L	ug/L	ug/L	ug/L

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

Report Date: January 16, 2023
P.O. #: verbal

Attention: Jeremy Baughman

Page 2 of 4

Column #	Sample Description	Sample Date	Recd. Date	Sample #
#1	Wastewater Effluent Composite	1/4/2023	01/06/23	23-0108
#2	Wastewater Effluent Grab	1/4/2023	01/06/23	23-0109
#3				

Total Toxic Organics(TTO)

Semivolatile (acids)	Result #1	Result #2	Result #3	Detection Limit(PQL)
2-nitrophenol	ND	-		10
4-nitrophenol	ND	-		10
pentachlorophenol	ND	-		10
phenol	ND	-		10
2,4,6-trichlorophenol	ND	-		10
Semivolatile (base neutral)				
Acenaphthene	ND	-		10
Acenaphthylene	ND	-		10
Anthracene	ND	-		10
Benzidine	ND	-		10
benzo[a]anthracene	ND	-		10
benzo[a]pyrene	ND	-		10
benzo[b]fluoranthene	ND	-		10
benzo[ghi]perylene	ND	-		10
benzo[k]fluoranthene	ND	-		10
bis(2-chloroethoxy)methane	ND	-		10
bis(2-chloroethyl)ether	ND	-		10
bis(2-chloroisopropyl)ether	ND	-		10
bis(2-ethylhexyl)phthalate	ND	-		10
4-bromophenyl phenyl ether	ND	-		10
butylbenzyl phthalate	ND	-		10
2-chloronaphthalene	ND	-		10
4-chlorophenyl phenyl ether	ND	-		10
chrysene	ND	-		10
dibenz[a,h]anthracene	ND	-		10
1,2-dichlorobenzene	ND	-		10
1,3-dichlorobenzene	ND	-		10
1,4-dichlorobenzene	ND	-		10
3,3-Dichlorobenzidine	ND	-		20
2,4-dinitrotoluene	ND	-		10
2,6-dinitrotoluene	ND	-		10
diethyl phthalate	ND	-		10
dimethyl phthalate	ND	-		10
di-n-butyl phthalate	ND	-		10
di-n-octyl phthalate	ND	-		10
1,2-Diphenylhydrazine	ND	-		10
fluoranthene	ND	-		10
fluorene	ND	-		10
hexachlorobenzene	ND	-		10
hexachlorobutadiene	ND	-		10
hexachlorocyclopentadiene	ND	-		10
hexachloroethane	ND	-		10
Units	ug/L	ug/L	ug/L	ug/L

Client: Material Handling Exchange, Inc.
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Report Date: January 16, 2023
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Page 3 of 4

Column #	Sample Description	Sample Date	Recd. Date	Sample #
#1	Wastewater Effluent Composite	1/4/2023	01/06/23	23-0108
#2	Wastewater Effluent Grab	1/4/2023	01/06/23	23-0109
#3				

Total Toxic Organics(TTO)

<u>Semivolatile (base neutral)</u>	<u>Result #1</u>	<u>Result #2</u>	<u>Result #3</u>	<u>Detection Limit(PQL)</u>
indeno[1,2,3-cd]pyrene	ND	-		10
isophorone	ND	-		10
naphthalene	ND	-		10
nitrobenzene	ND	-		10
N-nitrosodimethylamine	ND	-		10
N-nitrosodi-n-propylamine	ND	-		10
N-Nitrosodiphenylamine	ND	-		10
phenanthrene	ND	-		10
pyrene	ND	-		10
1,2,4-trichlorobenzene	ND	-		10

Pesticides

Aldrin	ND	-		1
Alpha-BHC	ND	-		1
Beta-BHC	ND	-		1
Delta-BHC	ND	-		1
Gamma-BHC	ND	-		1
Chlordane	ND	-		5
4,4-DDT	ND	-		1
4,4-DDE	ND	-		1
4,4-DDD	ND	-		1
Dieldrin	ND	-		1
Alpha endosulfan	ND	-		1
Beta endosulfan	ND	-		1
Endosulfan sulfate	ND	-		1
Endrin	ND	-		1
Endrin aldehyde	ND	-		1
Heptachlor	ND	-		1
Heptachlor epoxide	ND	-		1
Toxaphene	ND	-		5

Polychlorinated biphenyls(PCB's)

Aroclor-1016	ND	-		3
Aroclor-1221	ND	-		3
Aroclor-1232	ND	-		3
Aroclor-1242	ND	-		3
Aroclor-1248	ND	-		3
Aroclor-1254	ND	-		3
Aroclor-1260	ND	-		3

Dioxin

2,3,7,8-Tetrachloro-dibenzo-p-dioxin	NEG	-		10
Units	ug/L	ug/L	ug/L	ug/L

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Page 4 of 4

Column #	Sample Description	Sample Date	Recd. Date	Sample #
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#2	Wastewater Effluent Grab	1/4/2023	01/06/23	23-0109
#3				

Summation of all TTO's found	TTO Result	units	Limit (413,433,469)
Total Toxic Organics (TTO) =	ND	ug/L	2130

QA/QC Data	Sample QC #1 % Recovery	Sample QC #2 % Recovery	Sample QC #3 % Recovery	Acceptable Recovery
Surrogates Volatiles				
Dibromofluoromethane	-	91		82-132
1,2-Dichloroethane-d4	-	106		86-117
Toluene-d8	-	95		42-170
4-Bromofluorobenzene	-	105		62-129
Analyst:		PM		
Date Analyzed:		1/7/23		
Surrogates Semivolatiles				
2-Fluorophenol	74	-		35-118
Phenol-d6	77	-		25-114
2-Chlorophenol-d4	78	-		19-122
2,4,6-Tribromophenol	109	-		64-148
1,2-Dichlorobenzene-d4	64	-		21-115
Nitrobenzene-d5	72	-		29-122
2-Fluorobiphenyl	74	-		37-124
p-Terphenyl-d14	107	-		29-129
Analyst:	PM			
Date Prepared:	1/8/23			
Analyst:	PM			
Date Analyzed:	1/13/23			
Surrogates PCB/Pesticides				
Decachlorobiphenyl	3	-		10-180
Tetrachloro-m-xylene	7	-		10-124
Analyst:	JO			
Date Prepared:	1/11/23			
Analyst:	JO			
Date Analyzed:	1/12/23			

ND = Not Detected (Concentration is below the Practical Quantitation Level - PQL)
Analytical Method: EPA 624.1 ,625,608

ug/L = micrograms per Liter (ppb)
mg/L = milligrams per Liter (ppm)
mg/Kg = milligrams per Kilograms (ppm)

Analysis Certified By: _____ Laboratory Manager

John Ondo

[illegible]

ITM



MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

State Form 30530 (R4 / 7-19)

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

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PERMIT NUMBER								

0	0	2
OUTFALL NO.		

0	1	2	2
MO.		YR.	

No Discharge	<input checked="" type="checkbox"/>
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** < column: Can enter "<" if measurement value is less than limit of detection

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		Comp		Comp				
	Monitored	24TOT	Grab		Grab		Comp		Comp				
FREQUENCY	Permit Condition	Daily	Meter		Monthly		Monthly		Monthly				
	Monitored	Daily			Monthly		Monthly		Monthly				
EFFLUENT LIMITATIONS	Permit Minimum	N/A	5.0		N/A		N/A		N/A				
	Permit Average	Report	N/A		0.02		1.60		0.24				
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Sun	2												
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MONTHLY AVERAGE													
HIGHEST VALUE													
LOWEST VALUE													
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED													
TOTAL FLOW		0											

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		1/4/2023
Preparer's telephone number		Operator's certification number
317-213-0178		
Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement)		Date (month, day, year)
Jeremy Baughman		2/3/2023



MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

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I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

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OUTFALL NO.			

0	1	2	2
MO.		YR.	

No Discharge ☒

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This is a revised submittal.

EFFLUENT CHARACTERISTICS		Zink, 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		Comp			Comp			Comp			Comp	
	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			0.13			1.71	
	Permit Maximum		2.0			0.11			0.13			2.77	
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Tue 18													
Wed 19													
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Sat 22													
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Thu 27													
Fri 28													
Sat 29													
Sun 30													
Mon 31													
MONTHLY AVERAGE													
HIGHEST VALUE													
LOWEST VALUE													
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):

Date (month, day, year)

1/4/2023

Preparer's telephone number

Operator's certification number

317-213-0178

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

Jeremy Baughman

Date (month, day, year)



MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

State Form 30530 (R4 / 7-19)

FACILITY NAME AND ADDRESS:

Material Handling Exchange, Inc.
1001 Hurricane Street
Franklin Indiana 46131

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	6	2	7
PERMIT NUMBER								

0	0	2	
OUTFALL NO.			

0	1	2	2
MO.		YR.	

No Discharge ☒

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

This is a revised submittal.

EFFLUENT CHARACTERISTICS		Copper[Cu]		TTO									
EFFLUENT PARAMETER NUMBER		Q	C01119	Q	C78141	Q	C	Q	C				
SAMPLE TYPE	Permit Condition		Comp		Grab								
	Monitored		Comp		Grab								
FREQUENCY	Permit Condition		Monthly		2X/Year								
	Monitored		Monthly		2X/Year								
EFFLUENT LIMITATIONS	Permit Minimum		N/A		N/A								
	Permit Average		0.31		N/A								
	Permit Maximum		0.31		2.00								
UNITS=		LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L
	Sat 1												
	Sun 2												
	Mon 3												
	Tue 4												
	Wed 5												
	Thu 6												
	Fri 7												
	Sat 8												
	Sun 9												
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	Sun 30												
	Mon 31												
MONTHLY AVERAGE													
HIGHEST VALUE													
LOWEST VALUE													
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.

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