

DMR Copy of Record

Permit			
Permit #:	INP000627	Permittee:	MATERIAL HANDLING EXCHANGE, INC.
Major:	No	Permittee Address:	1001 HURRICANE ST FRANKLIN, IN 46131
Permitted Feature:	001 External Outfall	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 03/01/23 to 03/31/23	DMR Due Date:	04/28/23
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	Title:	operations manager
Last Name:	Amato	Telephone:	317-361-6434

No Data Indicator (NODI)
 Form NODI: --

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading					Quality or Concentration					# of Ex.	Frequency of Analysis	Sample Type			
					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3				Value 3	Units	
00400	pH	1 - Effluent Gross	0	--	Sample						=	6.9			=	7.17	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						=	0.02			=	0.02	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						=	0.04			=	0.04	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						<	0.01			<	0.01	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						=	0.09			=	0.09	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	=	0.00441005	=	0.007158	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
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INP000627_001A_MMR_2023_3.pdf	pdf	381171.0
Analytical_20230313_132002.pdf	pdf	1135204.0

Report Last Saved By

MATERIAL HANDLING EXCHANGE, INC.

User: HSSTOOLROOM
Name: Jeremy Baughman
E-Mail: hsstool@m-h-e.com
Date/Time: 2023-04-05 13:09 (Time Zone: -04:00)

Report Last Signed By

User: HSSTOOLROOM
Name: Jeremy Baughman
E-Mail: hsstool@m-h-e.com
Date/Time: 2023-04-05 13:10 (Time Zone: -04:00)

DMR Copy of Record

Permit			
Permit #:	INP000627	Permittee:	MATERIAL HANDLING EXCHANGE, INC.
Major:	No	Permittee Address:	1001 HURRICANE ST FRANKLIN, IN 46131
Permitted Feature:	002 External Outfall	Discharge:	002-A 002 POWDER COAT METAL PARTS - TO FRANKLIN POTW
Facility:		Facility Location:	MATERIAL HANDLING EXCHANGE, INC. 1001 N HURRICANE ST FRANKLIN, IN 46131

Report Dates & Status			
Monitoring Period:	From 03/01/23 to 03/31/23	DMR Due Date:	04/28/23
Status:	NetDMR Validated		

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Principal Executive Officer			
First Name:	Joe	Title:	operations manager
Last Name:	Amato	Telephone:	317-361-6434

No Data Indicator (NODI)
Form NODI: --

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading					Quality or Concentration						# of Ex.	Frequency of Analysis	Sample Type				
					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3				Units			
00400	pH	1 - Effluent Gross	0	--	Sample																	
					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																	
					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																	
					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																	
					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																	
					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																	
					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																	
					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																	
					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																	
					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																	
					Permit Req.		Req Mon MO AVG		Req Mon DAILY MX	03 - MGD										01/01 - Daily	TM - TOTALZ	
					Value NODI		C - No Discharge		C - No Discharge													

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_3.pdf	pdf	377136.0
Analytical_20230313_132002.pdf	pdf	1135204.0

Report Last Saved By

MATERIAL HANDLING EXCHANGE, INC.

User: HSSTOOLROOM
Name: Jeremy Baughman
E-Mail: hsstool@m-h-e.com
Date/Time: 2023-04-05 12:42 (Time Zone: -04:00)

Report Last Signed By

User: HSSTOOLROOM
Name: Jeremy Baughman
E-Mail: hsstool@m-h-e.com
Date/Time: 2023-04-05 12:43 (Time Zone: -04:00)



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	3	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			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
Wed	1	0.005227	6.92		0.00087239		0.02	0.00174477		0.04	0.0002181	<	0.005
Thu	2	0.005904	7.15										
Fri	3	0.001948	7.07										
Sat	4	N/A	N/A										
Sun	5	N/A	N/A										
Mon	6	0.00447	7.07										
Tue	7	0.005431	7.05										
Wed	8	0.003011	7.11										
Thu	9	0.004084	7.09										
Fri	10	0.004738	7.11										
Sat	11	N/A	N/A										
Sun	12	N/A	N/A										
Mon	13	0.004219	7.12										
Tue	14	0.004699	6.9										
Wed	15	0.004053	7.16										
Thu	16	0.004843	7.13										
Fri	17	0.0043	7.01										
Sat	18	N/A	N/A										
Sun	19	N/A	N/A										
Mon	20	0.004066	7.17										
Tue	21	0.004403	6.99										
Wed	22	0.004466	7.09										
Thu	23	0.00397	7.06										
Fri	24	0.007158	6.9										
Sat	25	N/A	N/A										
Sun	26	N/A	N/A										
Mon	27	0.00369	6.93										
Tue	28	0.004578	7.06										
Wed	29	0.004268	7.17										
Thu	30	0.004208	7.08										
Fri	31	0.003697	7.03										
MONTHLY AVERAGE		0.00441004			0.00087239		0.02	0.00174477		0.04	0.0002181		0.005
HIGHEST VALUE		0.007158	7.17		0.00087239		0.02	0.00174477		0.04	0.0002181		0.005
LOWEST VALUE		0.001948	6.9		0.00087239		0.02	0.00174477		0.04	0.0002181		0.005
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED													

TOTAL FLOW 0.101431

Prepared by or under the direction of (Certified Operator): Jeremy Baughman Date (month, day, year) 3/1/2023

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.

Preparer's telephone number 317-213-0178 Operator's certification number

Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement) Jeremy Baughman Date (month, day, year) 3/5/2023



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	3	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				
	Wed 1	0.00043619	<	0.01	0.0002181	<	0.005	0.00043619	<	0.01	0.00043619	<	0.01				
	Thu 2																
	Fri 3																
	Sat 4																
	Sun 5																
	Mon 6																
	Tue 7																
	Wed 8																
	Thu 9																
	Fri 10																
	Sat 11																
	Sun 12																
	Mon 13																
	Tue 14																
	Wed 15																
	Thu 16																
	Fri 17																
	Sat 18																
	Sun 19																
	Mon 20																
	Tue 21																
	Wed 22																
	Thu 23																
	Fri 24																
	Sat 25																
	Sun 26																
	Mon 27																
	Tue 28																
	Wed 29																
	Thu 30																
	Fri 31																
MONTHLY AVERAGE		0.00043619		0.01	0.0002181		0.005	0.00043619		0.01	0.00043619		0.01				
HIGHEST VALUE		0.00043619		0.01	0.0002181		0.005	0.00043619		0.01	0.00043619		0.01				
LOWEST VALUE		0.00043619		0.01	0.0002181		0.005	0.00043619		0.01	0.00043619		0.01				
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED																	

<p>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.</p>	<p>Prepared by or under the direction of (Certified Operator): Jeremy Baughman</p>	<p>Date (month, day, year) 3/1/2023</p>	
	<p>Preparer's telephone number 317-213-0178</p>	<p>Operator's certification number</p>	
	<p>Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement) Jeremy Baughman</p>	<p>Date (month, day, year)</p>	



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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.

I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	1
OUTFALL NO.		

0	3	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		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
	Wed 1	0.00392574	0.09						
	Thu 2								
	Fri 3								
	Sat 4								
	Sun 5								
	Mon 6								
	Tue 7								
	Wed 8								
	Thu 9								
	Fri 10								
	Sat 11								
	Sun 12								
	Mon 13								
	Tue 14								
	Wed 15								
	Thu 16								
	Fri 17								
	Sat 18								
	Sun 19								
	Mon 20								
	Tue 21								
	Wed 22								
	Thu 23								
	Fri 24								
	Sat 25								
	Sun 26								
	Mon 27								
	Tue 28								
	Wed 29								
	Thu 30								
	Fri 31								
MONTHLY AVERAGE		0.00392574	0.09						
HIGHEST VALUE		0.00392574	0.09						
LOWEST VALUE		0.00392574	0.09						
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED									

<p>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.</p>	<p>Prepared by or under the direction of (Certified Operator): Jeremy Baughman</p>	<p>Date (month, day, year) 3/1/2023</p>
	<p>Preparer's telephone number 317-213-0178</p>	<p>Operator's certification number</p>
	<p>Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement) Jeremy Baughman</p>	<p>Date (month, day, year)</p>

Sample Chain of Custody Record

Site Name: Material Handling Exchange, Inc.		Sample chilled/iced <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Site Address: 1001 Hurricane Road Franklin, IN 46131		Temp (C): <u>5</u>	
		Project Name: _____	

Sample Date	Sample Time	Comp. Grab	Sample Location/site ID	Number of Containers	Analysis / Preservative	
					Plastic 8oz w/HNO3 7 Metals	Plastic 8oz w/NaOH Total Cyanide
3-1-23	7-3	X	Wastewater Effluent	1	X	
3-1-23	11am	X	Wastewater Effluent	1	X	

For Composite: a sample was collected every <u>40</u> minutes for a total of <u>8</u> hours	Lab # <u>23-1094</u>
Frequency = 1/month TTO = 1/6months	

Sampler(s) [print name(s)-sign below]: Anna Cornie		Report to: Jeremy Baughman Material Handling Exchange, Inc. 1800 Churchman Ave Indianapolis, IN 46203	
Relinquished by: (sampler signature) <i>Anna Cornie</i>	Date/Time: _____	Received by: (signature or shipper) <i>UPS</i>	Date/Time: _____
Relinquished by: (signature) <i>UPS</i>	Date/Time: 3/7/23 @ 2:30pm	Received by: (signature or shipper) <i>UPS (AS)</i>	Date/Time: _____
Relinquished by: (signature) _____	Date/Time: _____	Received by: (signature or shipper) _____	Date/Time: _____

Water & Wastewater Laboratories, Inc.
 2779 Rockefeller Avenue
 Cleveland, Ohio 44115
 Phone: (216)696-0280
 Fax: (216)696-6831





MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

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 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.		

0	3	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			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
Wed	1												
Thu	2												
Fri	3												
Sat	4												
Sun	5												
Mon	6												
Tue	7												
Wed	8												
Thu	9												
Fri	10												
Sat	11												
Sun	12												
Mon	13												
Tue	14												
Wed	15												
Thu	16												
Fri	17												
Sat	18												
Sun	19												
Mon	20												
Tue	21												
Wed	22												
Thu	23												
Fri	24												
Sat	25												
Sun	26												
Mon	27												
Tue	28												
Wed	29												
Thu	30												
Fri	31												
MONTHLY AVERAGE													
HIGHEST VALUE													
LOWEST VALUE													
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED													
TOTAL FLOW		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 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): Jeremy Baughman Date (month, day, year) 3/1/2023

Preparer's telephone number 317-213-0178 Operator's certification number _____

Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement) Jeremy Baughman Date (month, day, year) 4/5/2023



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	2
OUTFALL NO.		

0	3	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		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				
Wed	1												
Thu	2												
Fri	3												
Sat	4												
Sun	5												
Mon	6												
Tue	7												
Wed	8												
Thu	9												
Fri	10												
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Mon	27												
Tue	28												
Wed	29												
Thu	30												
Fri	31												
MONTHLY AVERAGE													
HIGHEST VALUE													
LOWEST VALUE													
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED													

<p>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.</p>	<p>Prepared by or under the direction of (Certified Operator): Jeremy Baughman</p>	<p>Date (month, day, year) 3/1/2023</p>	
	<p>Preparer's telephone number 317-213-0178</p>	<p>Operator's certification number</p>	
	<p>Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement) Jeremy Baughman</p>	<p>Date (month, day, year)</p>	



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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	3	2	3
MO.		YR.	

No Discharge
 This is a revised submittal.

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

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
	Wed 1								
	Thu 2								
	Fri 3								
	Sat 4								
	Sun 5								
	Mon 6								
	Tue 7								
	Wed 8								
	Thu 9								
	Fri 10								
	Sat 11								
	Sun 12								
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	Tue 21								
	Wed 22								
	Thu 23								
	Fri 24								
	Sat 25								
	Sun 26								
	Mon 27								
	Tue 28								
	Wed 29								
	Thu 30								
	Fri 31								
MONTHLY AVERAGE									
HIGHEST VALUE									
LOWEST VALUE									
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED									

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