

DMR Copy of Record

Permit					
Permit #:	INP000627	Permittee:	MATERIAL HANDLING EXCHANGE, INC.	Facility:	MATERIAL HANDLING EXCHANGE, INC.
Major:	No	Permittee Address:	1001 HURRICANE ST FRANKLIN, IN 46131	Facility Location:	1001 N HURRICANE ST FRANKLIN, IN 46131
Permitted Feature:	001 External Outfall	Discharge:	001-A 001 POWDER COAT METAL PARTS - TO FRANKLIN POTW		

Report Dates & Status					
Monitoring Period:	From 05/01/23 to 05/31/23	DMR Due Date:	06/28/23	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	Telephone:	317-361-6434
Last Name:	Amato				

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						=	7.12			=	7.57	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																	
X 00720	Cyanide, total [as CN]	1 - Effluent Gross	0	--	Sample						=	0.03			=	0.03	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						=	0.03			=	0.03	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						=	0.11			=	0.11	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	=	0.00490504	=	0.008282	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						
Code	Parameter Name	Monitoring Location	Field	Type	Description	Acknowledge
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.	Yes
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.	Yes

Comments

Franklin city ordinance has raised the city limits for the Cyanide from .02 to .23. I am working with Kevin Stark and Sally K. Brown to get our permits updated.

Attachments

Name	Type	Size
Analytical_20230526_110228.pdf	pdf	1128722.0
Analytical_20230609_105043.pdf	pdf	1129485.0
INP000627_001A_MMR_2023_5.pdf	pdf	381095.0

Report Last Saved By

MATERIAL HANDLING EXCHANGE, INC.

User: HSSTOOLROOM
Name: Jeremy Baughman
E-Mail: hsstool@m-h-e.com
Date/Time: 2023-06-23 07:36 (Time Zone: -04:00)

Report Last Signed By

User: HSSTOOLROOM
Name: Jeremy Baughman
E-Mail: hsstool@m-h-e.com
Date/Time: 2023-06-23 07:37 (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:	MATERIAL HANDLING EXCHANGE, INC.		
Facility Location:	1001 N HURRICANE ST FRANKLIN, IN 46131		

Report Dates & Status			
Monitoring Period:	From 05/01/23 to 05/31/23	DMR Due Date:	06/28/23
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																
					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

Analytical_20230526_110228.pdf	pdf	1128722.0
Analytical_20230609_105043.pdf	pdf	1129485.0
INP000627_002A_MMR_2023_5.pdf	pdf	377121.0

Report Last Saved By

MATERIAL HANDLING EXCHANGE, INC.

User: HSSTOOLROOM
Name: Jeremy Baughman
E-Mail: hsstool@m-h-e.com
Date/Time: 2023-06-23 07:05 (Time Zone: -04:00)

Report Last Signed By

User: HSSTOOLROOM
Name: Jeremy Baughman
E-Mail: hsstool@m-h-e.com
Date/Time: 2023-06-23 07:06 (Time Zone: -04:00)

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): 20 Project Name:	
Sample Date	Sample Time	Comp. Grab	Sample Location/site ID
5-16-23	8-4	X	Wastewater Effluent
5-16-23	12pm	X	Wastewater Effluent
		Number of Containers	
		Plastic 8oz w/HNO3 7 Metals	
		Plastic 8oz w/NaOH Total Cyanide	
		Analysis / Preservative	
Relinquished by: (signature) <i>Anna Larrie</i>		Received by: (signature or shipper) <i>Jeremy Baughman</i>	
Relinquished by: (signature) <i>1105</i>		Received by: (signature or shipper) <i>Jeremy Baughman</i>	
Relinquished by: (signature)		Received by: (signature or shipper)	
Date/Time:		Date/Time:	
05/18/23 1420		05/18/23 1420	
Date/Time:		Date/Time:	
Date/Time:		Date/Time:	

Report to: Jeremy Baughman
Material Handling Exchange, Inc.
1800 Churchman Ave
Indianapolis, IN 46203

Phone: _____
Fax: _____
P.O.#: _____
Bill to: _____

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

Sample Comments: **For Composite: a sample was collected every 60 minutes for a total of 8 hours**

Lab # **23-2499**

23-2500

Frequency = 1/month
TTO = 1/6months



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	5	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			0.02		1.60		0.43		
UNITS =		MGD	HI	LOW	LB/DAY **	MG/L	LB/DAY **	MG/L	LB/DAY **	MG/L	
Mon	1	0.006992	7.26		0.00175045	0.03	0.00116696	0.02	0.00029174	<	0.005
Tue	2	0.004398	7.31								
Wed	3	0.003671	7.12								
Thu	4	0.004461	7.17								
Fri	5	0.008282	7.57								
Sat	6	0.006117	7.3								
Sun	7	N/A	N/A								
Mon	8	0.006636	7.54								
Tue	9	0.00538	7.42								
Wed	10	0.004242	7.36								
Thu	11	0.004324	7.49								
Fri	12	0.004225	7.55								
Sat	13	0.003476	7.39								
Sun	14	N/A	N/A								
Mon	15	0.003993	7.43								
Tue	16	0.004633	7.42								
Wed	17	0.004603	7.5								
Thu	18	0.00381	7.54								
Fri	19	0.004516	7.44								
Sat	20	0.003398	7.47								
Sun	21	N/A	N/A								
Mon	22	0.007167	7.55								
Tue	23	0.004509	7.35								
Wed	24	0.004615	7.32								
Thu	25	0.004153	7.32								
Fri	26	0.004406	7.43								
Sat	27	N/A	N/A								
Sun	28	N/A	N/A								
Mon	29	N/A	N/A								
Tue	30	0.004906	7.41								
Wed	31	0.005713	7.21								
MONTHLY AVERAGE		0.00490504			0.00175045	0.03	0.00116696	0.02	0.00029174		0.005
HIGHEST VALUE		0.008282		7.57	0.00175045	0.03	0.00116696	0.02	0.00029174		0.005
LOWEST VALUE		0.003398		7.12	0.00175045	0.03	0.00116696	0.02	0.00029174		0.005
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED											

TOTAL FLOW 0.122626

Prepared by or under the direction of (Certified Operator): Jeremy Baughman Date (month, day, year) 5/30/2023

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) 6/23/2023



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	5	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	LB/DAY	**	MG/L	
Mon	1			0.3	0.00029174	<	0.005	0.00058348	<	0.01	0.00058348	<	0.01				
Tue	2																
Wed	3																
Thu	4																
Fri	5																
Sat	6																
Sun	7																
Mon	8																
Tue	9																
Wed	10																
Thu	11																
Fri	12																
Sat	13																
Sun	14																
Mon	15																
Tue	16																
Wed	17																
Thu	18																
Fri	19																
Sat	20																
Sun	21																
Mon	22																
Tue	23																
Wed	24																
Thu	25																
Fri	26																
Sat	27																
Sun	28																
Mon	29																
Tue	30																
Wed	31																
MONTHLY AVERAGE					0.00029174		0.005	0.00058348		0.01	0.00058348		0.01				
HIGHEST VALUE					0.00029174		0.005	0.00058348		0.01	0.00058348		0.01				
LOWEST VALUE					0.00029174		0.005	0.00058348		0.01	0.00058348		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):</p> <p style="text-align: center;">Jeremy Baughman</p>	<p>Date (month, day, year)</p> <p style="text-align: center;">5/30/2023</p>	
	<p>Preparer's telephone number</p> <p style="text-align: center;">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)</p> <p style="text-align: center;">Jeremy Baughman</p>	<p>Date (month, day, year)</p>	



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I	N	P	0	0	0	6	2	7
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0	0	1
OUTFALL NO.		

0	5	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
	Mon 1	0.00641831	0.11						
	Tue 2								
	Wed 3								
	Thu 4								
	Fri 5								
	Sat 6								
	Sun 7								
	Mon 8								
	Tue 9								
	Wed 10								
	Thu 11								
	Fri 12								
	Sat 13								
	Sun 14								
	Mon 15								
	Tue 16								
	Wed 17								
	Thu 18								
	Fri 19								
	Sat 20								
	Sun 21								
	Mon 22								
	Tue 23								
	Wed 24								
	Thu 25								
	Fri 26								
	Sat 27								
	Sun 28								
	Mon 29								
	Tue 30								
	Wed 31								
MONTHLY AVERAGE		0.00641831	0.11						
HIGHEST VALUE		0.00641831	0.11						
LOWEST VALUE		0.00641831	0.11						
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) 5/30/2023</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): 20 Project Name:	
Sample Date	Sample Time	Comp. Grab	Sample Location/site ID
5-16-23	8-4	X	Wastewater Effluent
5-16-23	12pm	X	Wastewater Effluent
		Number of Containers	
		Plastic 8oz w/HNO3 7 Metals	
		Plastic 8oz w/NaOH Total Cyanide	
		Analysis / Preservative	
Relinquished by: (signature) <i>Anna Corrie</i>		Received by: (signature or shipper) <i>Jeremy Baughman</i>	
Date/Time: 05/18/23 1420		Received by: (signature or shipper) (initials) <i>JB</i>	
Relinquished by: (signature) <i>1105</i>		Received by: (signature or shipper)	
Date/Time:		Received by: (signature or shipper)	
Relinquished by: (signature)		Received by: (signature or shipper)	

Report to: Jeremy Baughman Material Handling Exchange, Inc. 1800 Churchman Ave Indianapolis, IN 46203	Water & Wastewater Laboratories, Inc. 2779 Rockefeller Avenue Cleveland, Ohio 44115 Phone: (216)696-0280 Fax: (216)696-6831
Phone: P.O.#: Fax: Bill to:	Sample Comments: For Composite: a sample was collected every 60 minutes for a total of 8 hours 23-2499 23-2500 Lab #
Frequency = 1/month TTO = 1/6months	



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	2
OUTFALL NO.		

0	5	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
Mon	1												
Tue	2												
Wed	3												
Thu	4												
Fri	5												
Sat	6												
Sun	7												
Mon	8												
Tue	9												
Wed	10												
Thu	11												
Fri	12												
Sat	13												
Sun	14												
Mon	15												
Tue	16												
Wed	17												
Thu	18												
Fri	19												
Sat	20												
Sun	21												
Mon	22												
Tue	23												
Wed	24												
Thu	25												
Fri	26												
Sat	27												
Sun	28												
Mon	29												
Tue	30												
Wed	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
 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):
5/16/2023
6/23/2023



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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	5	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				
Mon	1												
Tue	2												
Wed	3												
Thu	4												
Fri	5												
Sat	6												
Sun	7												
Mon	8												
Tue	9												
Wed	10												
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Sun	28												
Mon	29												
Tue	30												
Wed	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>	Prepared by or under the direction of (Certified Operator): Jeremy Baughman	Date (month, day, year) 5/16/2023
	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)



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I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	2
OUTFALL NO.		

0	5	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
Mon	1								
Tue	2								
Wed	3								
Thu	4								
Fri	5								
Sat	6								
Sun	7								
Mon	8								
Tue	9								
Wed	10								
Thu	11								
Fri	12								
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Fri	26								
Sat	27								
Sun	28								
Mon	29								
Tue	30								
Wed	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>	