

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 07/01/23 to 07/31/23

DMR Due Date:08/28/23

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						=	6.42			=	7.39	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								<	0.01	<	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								=	0.03	=	0.03	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	=	0.00549714	=	0.00994	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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Analytical_20230724_123621.pdf		pdf	1169043.0
INP000627_001A_MMR_2023_7.pdf		pdf	728029.0
<b>Report Last Saved By</b>			
<b>MATERIAL HANDLING EXCHANGE, INC.</b>			
User:	HSSTOOLROOM		
Name:	Jeremy Baughman		
E-Mail:	hsstool@m-h-e.com		
Date/Time:	2023-08-09 06:57 (Time Zone: -04:00)		
<b>Report Last Signed By</b>			
User:	HSSTOOLROOM		
Name:	Jeremy Baughman		
E-Mail:	hsstool@m-h-e.com		
Date/Time:	2023-08-09 06:57 (Time Zone: -04:00)		

DMR Copy of Record

Permit

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INP000627

Major:

No

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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:

002  
External Outfall

Discharge:

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

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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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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														01/01 - Daily	GR - GRAB
					Permit Req.						>=	5.0 DAILY MN			<=	10.0 DAILY MX	12 - SU			
					Value NODI							C - No Discharge				C - No Discharge				
00720	Cyanide, total [as CN]	1 - Effluent Gross	0	--	Sample														01/30 - Monthly	GR - GRAB
					Permit Req.								<=	0.02 MO AVG	<=	0.02 DAILY MX	19 - mg/L			
					Value NODI									C - No Discharge		C - No Discharge				
01074	Nickel, total recoverable	1 - Effluent Gross	0	--	Sample														01/30 - Monthly	24 - COMP24
					Permit Req.								<=	1.6 MO AVG	<=	1.6 DAILY MX	19 - mg/L			
					Value NODI									C - No Discharge		C - No Discharge				
01079	Silver total recoverable	1 - Effluent Gross	0	--	Sample														01/30 - Monthly	24 - COMP24
					Permit Req.								<=	0.24 MO AVG	<=	0.43 DAILY MX	19 - mg/L			
					Value NODI									C - No Discharge		C - No Discharge				
01094	Zinc, total recoverable	1 - Effluent Gross	0	--	Sample														01/30 - Monthly	24 - COMP24
					Permit Req.								<=	1.48 MO AVG	<=	2.0 DAILY MX	19 - mg/L			
					Value NODI									C - No Discharge		C - No Discharge				
01113	Cadmium, total recoverable	1 - Effluent Gross	0	--	Sample														01/30 - Monthly	24 - COMP24
					Permit Req.								<=	0.07 MO AVG	<=	0.11 DAILY MX	19 - mg/L			
					Value NODI									C - No Discharge		C - No Discharge				
01114	Lead, total recoverable	1 - Effluent Gross	0	--	Sample														01/30 - Monthly	24 - COMP24
					Permit Req.								<=	0.13 MO AVG	<=	0.13 DAILY MX	19 - mg/L			
					Value NODI									C - No Discharge		C - No Discharge				
01118	Chromium, total recoverable	1 - Effluent Gross	0	--	Sample														01/30 - Monthly	24 - COMP24
					Permit Req.								<=	1.71 MO AVG	<=	2.77 DAILY MX	19 - mg/L			
					Value NODI									C - No Discharge		C - No Discharge				
01119	Copper, total recoverable	1 - Effluent Gross	0	--	Sample														01/30 - Monthly	24 - COMP24
					Permit Req.								<=	0.31 MO AVG	<=	0.31 DAILY MX	19 - mg/L			
					Value NODI									C - No Discharge		C - No Discharge				
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0	--	Sample														01/01 - Daily	TM - TOTALZ
					Permit Req.		Req Mon MO AVG		Req Mon DAILY MX	03 - MGD										
					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

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Comments

Attachments

Name	Type	Size
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INP000627_002A_MMR_2023_7.pdf		pdf	730008.0
<b>Report Last Saved By</b>			
<b>MATERIAL HANDLING EXCHANGE, INC.</b>			
User:	HSSTOOLROOM		
Name:	Jeremy Baughman		
E-Mail:	hsstool@m-h-e.com		
Date/Time:	2023-08-09 06:38 (Time Zone: -04:00)		
<b>Report Last Signed By</b>			
User:	HSSTOOLROOM		
Name:	Jeremy Baughman		
E-Mail:	hsstool@m-h-e.com		
Date/Time:	2023-08-09 06:39 (Time Zone: -04:00)		



page 1 of 2

[illegible]

John Ondo




page 2 of 2

[illegible]

ND= not detected, less than the Method Detection Limit-MDL)

John Ondo

# Sample Chain of Custody Record

Site Name: <b>Material Handling Exchange, Inc.</b>			Sample chilled/iced <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<b>Water &amp; Wastewater Laboratories, Inc.</b> 2779 Rockefeller Avenue Cleveland, Ohio 44115 Phone: (216) 696-0280 Fax: (216) 696-6831	
Site Address: <b>1001 Hurricane Road Franklin, IN 46131</b>			Temp (C): Project Name:			
Sample Date	Sample Time	Comp. Grab	Sample Location/site ID	Number of Containers	Analysis / Preservative	Sample Comments
7-12-23	8-4	X	Wastewater Effluent	1	Plastic 8oz w/HNO3 7 Metals	For Composite: a sample was collected every <u>60</u> minutes for a total of <u>8</u> hours 23-3348
7-12-23	12pm	X	Wastewater Effluent	1	Plastic 8oz w/NaOH Total Cyanide	
Frequency = 1/month TTO = 1/6months						
Sampler(s) [print name(s)-sign below]: <b>Anna Corrie</b>						
Relinquished by: (sampler signature) <i>Anna Corrie</i>			Date/Time: Received by: (signature or shipper) <i>UPS</i>		Report to: <b>Jeremy Baughman</b> Material Handling Exchange, Inc. 1800 Churchman Ave Indianapolis, IN 46203	
Relinquished by: (signature) <i>UPS</i>			Date/Time: Received by: (signature or shipper) <i>7/14/23 9:30pm A Fontana</i>		Phone: Fax:	
Relinquished by: (signature) <i>[Signature]</i>			Date/Time: Received by: (signature or shipper)		P.O.#: 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.			

0	7	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				0.02		1.60		0.43			
UNITS =		MGD	HI	LOW	LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L
Sat 1		N/A	N/A										
Sun 2		N/A	N/A										
Mon 3		0.008223	7.04										
Tue 4		N/A	N/A										
Wed 5		0.009003	7.08										
Thu 6		0.00994	7.02										
Fri 7		N/A	N/A										
Sat 8		N/A	N/A										
Sun 9		N/A	N/A										
Mon 10		0.0012708	7.34										
Tue 11		0.005897	7.37										
Wed 12		0.006068	7.14		0.00050637	0.01	0.00101275	0.02	0.00025319	<		0.005	
Thu 13		0.005837	7.21										
Fri 14		N/A	N/A										
Sat 15		N/A	N/A										
Sun 16		N/A	N/A										
Mon 17		0.005054	7.36										
Tue 18		0.005294	7.19										
Wed 19		0.004987	6.62										
Thu 20		0.004241	6.72										
Fri 21		N/A	N/A										
Sat 22		N/A	N/A										
Sun 23		N/A	N/A										
Mon 24		0.003659	6.42										
Tue 25		0.004546	7.28										
Wed 26		0.006075	7.14										
Thu 27		0.006289	7.12										
Fri 28		N/A	N/A										
Sat 29		N/A	N/A										
Sun 30		N/A	N/A										
Mon 31		0.0015705	7.39										
MONTHLY AVERAGE		0.00549714			0.00050637	0.01	0.00101275	0.02	0.00025319			0.005	
HIGHEST VALUE		0.00994	7.39		0.00050637	0.01	0.00101275	0.02	0.00025319			0.005	
LOWEST VALUE		0.0012708	6.42		0.00050637	0.01	0.00101275	0.02	0.00025319			0.005	
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED													

TOTAL FLOW 0.0879543

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

Date (month, day, year)

Jeremy Baughman

7/12/2023

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

8/8/2023

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.			

0	7	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
Sat 1													
Sun 2													
Mon 3													
Tue 4													
Wed 5													
Thu 6													
Fri 7													
Sat 8													
Sun 9													
Mon 10													
Tue 11													
Wed 12		0.00050637	<	0.01	0.00025319	<	0.005	0.00050637	<	0.01	0.00050637	<	0.01
Thu 13													
Fri 14													
Sat 15													
Sun 16													
Mon 17													
Tue 18													
Wed 19													
Thu 20													
Fri 21													
Sat 22													
Sun 23													
Mon 24													
Tue 25													
Wed 26													
Thu 27													
Fri 28													
Sat 29													
Sun 30													
Mon 31													
MONTHLY AVERAGE		0.00050637		0.01	0.00025319		0.005	0.00050637		0.01	0.00050637		0.01
HIGHEST VALUE		0.00050637		0.01	0.00025319		0.005	0.00050637		0.01	0.00050637		0.01
LOWEST VALUE		0.00050637		0.01	0.00025319		0.005	0.00050637		0.01	0.00050637		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):

Jeremy Baughman

Date (month, day, year)

7/12/2023

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)



# MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

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0	7	2	3
MO.		YR.	

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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	LB/DAY	**	MG/L
Sat 1													
Sun 2													
Mon 3													
Tue 4													
Wed 5													
Thu 6													
Fri 7													
Sat 8													
Sun 9													
Mon 10													
Tue 11													
Wed 12		0.00151912		0.03									
Thu 13													
Fri 14													
Sat 15													
Sun 16													
Mon 17													
Tue 18													
Wed 19													
Thu 20													
Fri 21													
Sat 22													
Sun 23													
Mon 24													
Tue 25													
Wed 26													
Thu 27													
Fri 28													
Sat 29													
Sun 30													
Mon 31													
MONTHLY AVERAGE		0.00151912		0.03									
HIGHEST VALUE		0.00151912		0.03									
LOWEST VALUE		0.00151912		0.03									
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):

Jeremy Baughman

Date (month, day, year)

7/12/2023

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)




page 1 of 2

[illegible]



page 2 of 2

# Sample Chain of Custody Record

Site Name: <b>Material Handling Exchange, Inc.</b>			Sample chilled/iced <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<b>Water &amp; Wastewater Laboratories, Inc.</b> 2779 Rockefeller Avenue Cleveland, Ohio 44115 Phone: (216) 696-0280 Fax: (216) 696-6831	
Site Address: <b>1001 Hurricane Road Franklin, IN 46131</b>			Temp (C): Project Name:			
Sample Date	Sample Time	Comp. Grab	Sample Location/site ID	Number of Containers	Analysis / Preservative	Sample Comments
7-12-23	8-4	X	Wastewater Effluent	1	Plastic 8oz w/HNO3 7 Metals	For Composite: a sample was collected every 60 minutes for a total of 8 hours
7-12-23	12pm	X	Wastewater Effluent	1	Plastic 8oz w/NaOH Total Cyanide	23-3348
Frequency = 1/month TTO = 1/6months						
Sampler(s) [print name(s)-sign below]: <b>Anna Corrie</b>						
Relinquished by: (sampler signature) <i>Anna Corrie</i>			Date/Time: Received by: (signature or shipper) <i>UPS</i>		Report to: <b>Jeremy Baughman</b> Material Handling Exchange, Inc. 1800 Churchman Ave Indianapolis, IN 46203	
Relinquished by: (signature) <i>UPS</i>			Date/Time: Received by: (signature or shipper) <i>7/14/23 9:30pm A Fontana</i>		Phone: Fax:	
Relinquished by: (signature) <i>[Signature]</i>			Date/Time: Received by: (signature or shipper)		P.O.#: 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](mailto:hsstool@m-h-e.com)

I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	2
OUTFALL NO.		

0	7	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
Sat	1									
Sun	2									
Mon	3									
Tue	4									
Wed	5									
Thu	6									
Fri	7									
Sat	8									
Sun	9									
Mon	10									
Tue	11									
Wed	12									
Thu	13									
Fri	14									
Sat	15									
Sun	16									
Mon	17									
Tue	18									
Wed	19									
Thu	20									
Fri	21									
Sat	22									
Sun	23									
Mon	24									
Tue	25									
Wed	26									
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										
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):		Date (month, day, year)
Jeremy Baughman		7/12/2023
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		8/8/2023



# MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

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FOR SUBMITTAL.

I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	2	
OUTFALL NO.			

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

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

Jeremy Baughman

Date (month, day, year)

7/12/2023

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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PERMIT NUMBER								

0	0	2	
OUTFALL NO.			

0	7	2	3
MO.		YR.	

No Discharge

☒

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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												
	Mon 10												
	Tue 11												
	Wed 12												
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	Mon 24												
	Tue 25												
	Wed 26												
	Thu 27												
	Fri 28												
	Sat 29												
	Sun 30												
	Mon 31												
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HIGHEST VALUE													
LOWEST VALUE													
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED													

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