DMR Copy of Record

| Permit | | | _ | | | | | | | | | | | | | | | | |
|--------------------------------|---------------------|---------------------|----------|-------------|----------------------|--------------|----------------|---------------|---------------------------|--------------|-------------------|----------|---------------------|------------|-----------------------|----------------------------|--------------------|------------|----------------------|
| Permit #: IN | P000627 | | Permit | tee: | | MATERIA | L HANDLING | EXCHANG | E, INC. | | | Fa | cility: | | MATERIA | L HANDL | ING EXCHANGE | , INC. | |
| Major: No |) | | Permit | tee Address | 5: | 1001 HUF | RRICANE ST | | | | | Fa | cility Locat | ion: | 1001 N H | URRICAN | IE ST | | |
| | | | | | | FRANKLI | N, IN 46131 | | | | | | - | | FRANKLI | N, IN 4613 | 31 | | |
| Permitted Feature: 00 | 1 ternal Outfall | | Discha | rge: | | 001-A | | ται ραρ | TS - TO FRANKLIN POT | \ \ / | | | | | | | | | |
| Report Dates & Status | | | l | | | 0011 011 | DEROOAT | | | •• | | | | | | | | | |
| | om 08/01/23 to 0 | 8/31/23 | DMR D | ue Date: | | 09/28/23 | | | | | | St | atus: | | NetDMR | Validated | | | |
| Considerations for Form Com | pletion | | l | | | | | | | | | I | | | | | | | |
| THE FLOW MUST BE MEASUR | | ID FLOW MEASUR | EMENT | DEVICES. F | RETREA | TMENT TO |) FRANKLIN P | OTW JOH | NSON COUNTY | | | | | | | | | | |
| Principal Executive Officer | | | | | | | | | | | | | | | | | | | |
| irst Name: Jo | e | | Title: | | | operation | s manager | | | | | Те | lephone: | | 317-361-0 | 6434 | | | |
| ast Name: Ar | nato | | | | | | | | | | | I | | | | | | | |
| lo Data Indicator (NODI) | | | • | | | | | | | | | | | | | | | | |
| orm NODI: | | | | | | | | | | | | | | | | | | | |
| Parameter | | Monitoring Location | Season # | Param. NODI | | | | antity or Loa | | | | | ality or Conce | | | | # of Ex. Frequence | y of Analy | sis Sample |
| Code Name | | | | | Sample | Qualifier 1 | Value 1 | Qualifier 2 | Value 2 Units | Qualifier | 1 Value 1 6.82 | Qualifie | r 2 Value 2 | Qualifie | er 3 Value 3 7.59 | Units 12 - SU | 01/01 - Da | ilv | GR - GF |
| 0400 pH | | 1 - Effluent Gross | 0 | | Permit Req | | | | | >= | 5.0 DAILY MN | | | <= | 10.0 DAILY I | | 01/01 - Da | | GR - GI |
| | | | Ŭ | | Value NOD | | | | | | | | | | | | | | |
| | | | | | Sample | | | | | | | < | 0.01 | < | 0.01 | 19 - mg/l | | nthly | GR - GI |
| 0720 Cyanide, total [as CN] | | 1 - Effluent Gross | 0 | | Permit Req | | | | | | | <= | 0.02 MO A | /G <= | 0.02 DAILY I | /IX 19 - mg/l | 01/30 - Mo | nthly | GR - GI |
| | | | | | Value NOD | | | | | | | | | | | | | | |
| | | | | | Sample Permit Req | | | | | | | = <= | 0.03 | = | 0.03 1.6 DAILY M | 19 - mg/l X 19 - mg/l | | | 24 - CO 24 - CO |
| Nickel, total recoverable |) | 1 - Effluent Gross | 0 | | Value NOD | | | | | | | ~ | 1.0 110 710 | | 1.0 B/ 121 M | it it ing/l | | litility | 21 00 |
| | | | | | Sample | | | | | | | < | 0.005 | < | 0.005 | 19 - mg/l | 01/30 - Mo | nthlv | 24 - CO |
| 01079 Silver total recoverable | | 1 - Effluent Gross | 0 | | Permit Req | | | | | | | <= | 0.24 MO A | | 0.43 DAILY I | | | | 24 - CO |
| | | | | | Value NOD | | | | | | | | | | | | | | |
| | | | | | Sample | | | | | | | = | 0.02 | = | 0.02 | 19 - mg/l | | | 24 - CO |
| 201094Zinc, total recoverable | | 1 - Effluent Gross | 0 | | Permit Req | | | | | | | <= | 1.48 MO A | /G <= | 2.0 DAILY M | X 19 - mg/l | 01/30 - Mc | nthly | 24 - COI |
| | | | | | Value NOD | | | | | | | | 0.005 | | 0.005 | 10 // | 04/00 14 | | 24.00 |
| 1112 Codmium total recover | | 1 Effluent Cross | 0 | | Sample Permit Req | | | | | | | < <= | 0.005 0.07 MO AV | < /G <= | 0.005 0.11 DAILY I | 19 - mg/l /IX 19 - mg/l | | , | 24 - COI 24 - COI |
| 01113 Cadmium, total recovera | able | 1 - Effluent Gross | 0 | | Value NOD | | | | | | | | | | | j. | | | |
| | | | | | Sample | | | | | | | < | 0.01 | < | 0.01 | 19 - mg/l | 01/30 - Mo | nthly | 24 - CO |
| D1114 Lead, total recoverable | | 1 - Effluent Gross | 0 | | Permit Req | | | | | | | <= | 0.13 MO A | /G <= | 0.13 DAILY I | /IX 19 - mg/l | 01/30 - Mo | nthly | 24 - CO |
| | | | | | Value NOD | | | | | | | | | | | | | | |
| | | | | | Sample | | | | | | | < | 0.01 | < | 0.01 | 19 - mg/l | | | 24 - CO |
| 01118 Chromium, total recove | rable | 1 - Effluent Gross | 0 | | Permit Req | | | | | | | <= | 1.71 MO A | /G <= | 2.77 DAILY I | /IX 19 - mg/L | _ 01/30 - Mo | ntniy | 24 - CO |
| | | | | | Value NOD | | | | | | | = | 0.06 | = | 0.06 | 19 - mg/l | 01/30 - Mo | nthly | 24 - CO |
| 01119 Copper, total recoverab | le l | 1 - Effluent Gross | 0 | | Sample Permit Req | | | | | | | = <= | 0.06 0.31 MO A | | 0.06 0.31 DAILY I | | | , | 24 - CO 24 - CO |
| | | r - Enident Gross | 0 | - | Value NOD | | | | | | | | | | | | | | |
| | | | | | Sample | = | 0.00615832 | = | 0.02136 03 - MGE |) | | | | | | | 01/01 - Da | ily | TM - TO |
| 50050 Flow, in conduit or thru | treatment plant | 1 - Effluent Gross | 0 | | Permit Req | | Req Mon MO AVG | 3 | Req Mon DAILY MX 03 - MGE |) | | | | | | | 01/01 - Da | ily | TM - TO |
| | | | | | Value NOD | 1 | | | | | | | | | | | | | |

Submission Note

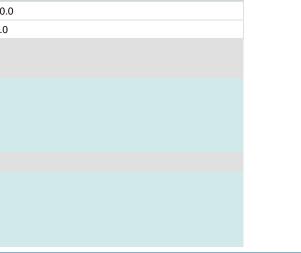
If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type. Edit Check Errors

No errors.

Comments

Attachments

| | Analytical_20230818_140149.pdf | | pdf | 1181230.0 |
|---|----------------------------------|--------------------------------------|-----|-----------|
| | INP000627_001A_MMR_2023_8.pdf | | pdf | 381227.0 |
| | Report Last Saved By | | | |
| | MATERIAL HANDLING EXCHANGE, INC. | | | |
| | User: | HSSTOOLROOM | | |
| | Name: | Jeremy Baughman | | |
| I | E-Mail: | hsstool@m-h-e.com | | |
| 1 | Date/Time: | 2023-09-28 14:36 (Time Zone: -04:00) | | |
| | Report Last Signed By | | | |
| | User: | HSSTOOLROOM | | |
| 1 | Name: | Jeremy Baughman | | |
| | E-Mail: | hsstool@m-h-e.com | | |
| | Date/Time: | 2023-09-28 14:36 (Time Zone: -04:00) | | |
| | | | | |



DMR Copy of Record

| Permit | | | | | | | | | | | | | | | | | | | |
|---------------|------------------------------|-----------------------|---------------------|----------|-----------------|-----------------------|-------------|------------------------------|----------------|------------------|-----------------|------------------|-----------|------------------------|-------------|------------------|-----------|---------------------------|------------------|
| Permit | #: IN | IP000627 | | F | Permittee: | | М | IATERIAL HANDL | NG EXCH | ANGE, INC. | | | | Facility: | | MATERIAL HAN | IDLING EX | CHANGE, INC. | |
| Major: | N | | | | Permittee Ad | dress: | | 001 HURRICANE | | | | | | Facility Location | 1: | 1001 N HURRIC | | | |
| | | - | | | - Stillittoo Au | | | RANKLIN, IN 4613 | | | | | | Location | | FRANKLIN, IN 4 | | | |
| Permitte | |)2 xternal Outfall | | C | Discharge: | | | 02-A 02 POWDER COA | T METAL F | PARTS - TO FRA | NKLIN POTW | | | | | | | | |
| Report | Dates & Status | | | | | | | | | | | | | | | | | | |
| | | rom 08/01/23 to | o 08/31/23 | c. | DMR Due Dat | te: | 09 | 9/28/23 | | | | | | Status: | | NetDMR Valida | ted | | |
| Conside | erations for Form Comp | letion | | 1 | | | | | | | | | | 1 | | | | | |
| | OW MUST BE MEASURE | D USING VALI | ID FLOW MEASUF | REMEN | T DEVICES. | PRETREAT | TMENT TO | O FRANKLIN POT | W JOHNS | ON COUNTY | | | | | | | | | |
| Principa | al Executive Officer | | | | | | | | | | | | | | | | | | |
| · First Na | | be | | h | Title: | | or | perations manager | | | | | | Telephone: | | 317-361-6434 | | | |
| Last Na | | mato | | | | | | | | | | | | | | | | | |
| No Data | a Indicator (NODI) | | | ļ | | | | | | | | | | | | | | | |
| Form N | | | | | | | | | | | | | | | | | | | |
| | Parameter | | Monitoring Location | n Season | n # Param. NODI | | | Quar | ntity or Loadi | ng | | | | Quality or Concentrati | on | | # | of Ex. Frequency of Analy | lysis Sample Typ |
| Code | Name | | | | | | Qualifier 1 | Value 1 | Qualifier 2 | Value 2 | Units Qualifier | 1 Value 1 | Qualifier | 2 Value 2 | Qualifier 3 | 3 Value 3 | Units | | |
| | | | | | | Sample Permit Req. | | | | | >= | 5.0 DAILY MN | | | <= | 10.0 DAILY MX | 12 - SU | 01/01 - Daily | GR - GRAB |
| 00400 | рН | | 1 - Effluent Gross | 0 | | Value NODI | | | | | ~- | C - No Discharge | | | ~= | C - No Discharge | 12 00 | o not Daily | |
| | | | | | | Sample | | | | | | e ne bischarge | | | | e ne bischarge | | | |
| 00720 | Cyanide, total [as CN] | | 1 - Effluent Gross | 0 | | Permit Req. | | | | | | | <= | 0.02 MO AVG | <= | 0.02 DAILY MX | 19 - mg/L | 01/30 - Monthly | GR - GRAB |
| 00720 | Oyanide, total [as on] | | 1 - Endent Gloss | U | | Value NODI | | | | | | | | C - No Discharge | | C - No Discharge | | | |
| | | | | | | Sample | | | | | | | | | | | | | |
| 01074 | Nickel, total recoverable | | 1 - Effluent Gross | 0 | | Permit Req. | | | | | | | <= | 1.6 MO AVG | <= | 1.6 DAILY MX | 19 - mg/L | 01/30 - Monthly | 24 - COMP24 |
| | | | | | | Value NODI | | | | | | | | C - No Discharge | | C - No Discharge | | | |
| | | | | | | Sample | | | | | | | | | | | | | |
| 01079 | Silver total recoverable | | 1 - Effluent Gross | 0 | | Permit Req. | | | | | | | <= | 0.24 MO AVG | <= | 0.43 DAILY MX | 19 - mg/L | 01/30 - Monthly | 24 - COMP24 |
| | | | | | | Value NODI | | | | | | | | C - No Discharge | | C - No Discharge | | | |
| | | | . = | | | Sample Permit Req. | | | | | | | <= | 1.48 MO AVG | <= | 2.0 DAILY MX | 19 - mg/L | 01/30 - Monthly | 24 - COMP24 |
| 01094 | Zinc, total recoverable | | 1 - Effluent Gross | 0 | | Value NODI | | | | | | | | C - No Discharge | | C - No Discharge | 10g, 2 | | |
| | | | | | | Sample | | | | | | | | | | | | | |
| 01113 | Cadmium, total recoverab | le | 1 - Effluent Gross | 0 | | Permit Req. | | | | | | | <= | 0.07 MO AVG | <= | 0.11 DAILY MX | 19 - mg/L | 01/30 - Monthly | 24 - COMP24 |
| 01110 | | | | Ŭ | | Value NODI | | | | | | | | C - No Discharge | | C - No Discharge | | | |
| | | | | | | Sample | | | | | | | | | | | | | |
| 01114 | Lead, total recoverable | | 1 - Effluent Gross | 0 | | Permit Req. | | | | | | | <= | 0.13 MO AVG | <= | 0.13 DAILY MX | 19 - mg/L | 01/30 - Monthly | 24 - COMP24 |
| | | | | | | Value NODI | | | | | | | | C - No Discharge | | C - No Discharge | | | |
| | | | | | | Sample | | | | | | | | | | | | | |
| 01118 | Chromium, total recovera | ble | 1 - Effluent Gross | 0 | | Permit Req. | | | | | | | <= | 1.71 MO AVG | | 2.77 DAILY MX | 19 - mg/L | 01/30 - Monthly | 24 - COMP24 |
| | | | | | | Value NODI | | | | | | | | C - No Discharge | | C - No Discharge | | | |
| | | | | | | Sample Permit Req. | | | | | | | <= | 0.31 MO AVG | <= | 0.31 DAILY MX | 19 - mg/L | 01/30 - Monthly | 24 - COMP24 |
| U1119 | Copper, total recoverable | | 1 - Effluent Gross | 0 | | Value NODI | | | | | | | | C - No Discharge | | C - No Discharge | | | 2. 00111 21 |
| | | | | | | Sample | | | | | | | | e ne biosnargo | | S Dioritargo | | | |
| 50050 | Flow, in conduit or thru tr | eatment plant | 1 - Effluent Gross | 0 | | Permit Req. | | Req Mon MO AVG | R | Req Mon DAILY MX | 03 - MGD | | | | | | | 01/01 - Daily | TM - TOTALZ |
| 00000 | . ion, in conduit or till ut | outinont plant | Elliashi Gioss | U | | 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

| Analytical_20230818_140149.pdf | | pdf |
|----------------------------------|--------------------------------------|-----|
| INP000627_002A_MMR_2023_8.pdf | | pdf |
| Report Last Saved By | | |
| MATERIAL HANDLING EXCHANGE, INC. | | |
| User: | HSSTOOLROOM | |
| Name: | Jeremy Baughman | |
| E-Mail: | hsstool@m-h-e.com | |
| Date/Time: | 2023-09-28 14:19 (Time Zone: -04:00) | |
| Report Last Signed By | | |
| User: | HSSTOOLROOM | |
| Name: | Jeremy Baughman | |
| E-Mail: | hsstool@m-h-e.com | |
| Date/Time: | 2023-09-28 14:20 (Time Zone: -04:00) | |
| | | |

| 1181230.0 | |
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| 377133.0 | |
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Client: Material Handling Exchange, Inc. Address: 1800 Churchman Ave Indianapolis, IN 46203 Attention: Jeremy Baughman

Report Date: August 18, 2023

P.O. #: verbal

page 1 of 2

| Column # | Sample Description | Sample Date | Recd. Date | Sample # |
|----------|-------------------------------|-------------|------------|----------|
| #1 | Wastewater Effluent Composite | 8/9/23 | 8/11/23 | 23-3841 |
| #2 | Wastewater Effluent Grab | 8/9/23 | 8/11/23 | 23-3842 |
| #3 | | 0/0/20 | 0/11/25 | 23-3042 |

| Parameter | #1 | #2 | #3 | Units | Method | MDL |
|---------------------------------------|---------|-------|----|-------|------------|-------|
| Total Metals | 8 | | | - | 200.2 | - |
| Cadmium | <0.005 | - | | mg/L | 200.7 | 0.005 |
| Chromium, total | <0.01 | - | | mg/L | 200.7 | 0.01 |
| Copper | 0.06 | - | | mg/L | 200.7 | 0.01 |
| Lead | <0.01 | - | | mg/L | 200.7 | 0.01 |
| Nickel | 0.03 | - | | mg/L | 200.7 | 0.01 |
| Silver | < 0.005 | - | | mg/L | 200.7 | 0.005 |
| Zinc | 0.02 | - | | mg/L | 200.7 | 0.01 |
| Total Cyanide | _ | <0.01 | | | | |
| · · · · · · · · · · · · · · · · · · · | | -0.01 | | mg/L | 4500CN C/E | 0.01 |
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| No | | | | | | |
| | | | | | | |

Unit Desc: mg/L = milligrams per liter (ppm), ug/L = micrograms per liter (ppb), mg/Kg = milligrams per Kilograms (ppm) Std = Standard pH units, ng/L = nanograms per liter (ppt), ND= not detected, loca than the Mathed Date dimensional

Std = Standard pH units, ng/L = nanograms per liter (ppt), ND= not detected, less than the Method Detection Limit-MDL) < = less than (not detected, below listed value), > = greater than (higher than listed value)

| Analysis Certified By | A. Ol | Laboratory Manager |
|-----------------------|-----------|--------------------|
| | John Ondo | |

2779 Rockefeller Avenue • Cleveland, Ohio 44115 • (216) 696-0280 • Fax (216) 696-6831



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

Report Date: August 18, 2023

| P.O. #: | verbal |
|---------|-------------|
| | page 2 of 2 |

| Column # | Sample Description | Sample Date | Recd. Date | Sample # |
|----------|-------------------------------|-------------|------------|----------|
| #1 | Wastewater Effluent Composite | 8/9/23 | 8/11/23 | 23-3841 |
| #2 | Wastewater Effluent Grab | 8/9/23 | 8/11/23 | |
| #3 | | 0/3/23 | 0/11/23 | 23-3842 |

| | | Method | Matrix Spike | Matrix D | uplicate | | | | |
|--------------------------------|-------------------|---------------|--------------------|---------------------------|-----------------------------|-------|----------------|---------|------------------|
| Analytical Batch QA/QC Data | LCS % recovery | Blank mg/L | (MS) % recovery | Spike (MSD) % recovery | Sample (Dup) % Deviation | MDL | Test Method | Analyst | Date Analyzed |
| Total Metals | | | | | | - | 200.2 | RK | 8/14/2023 |
| Cadmium | 98 | ND | 104 | - | 0 | 0.005 | 200.7 | RK | 8/15/2023 |
| Chromium, total | 93 | ND | 96 | - | 0 | 0.01 | 200.7 | RK | 8/15/2023 |
| Copper | 100 | ND | 108 | - | 0 | 0.01 | 200.7 | RK | 8/15/2023 |
| Lead | 98 | ND | 100 | • | 0 | 0.01 | 200.7 | RK | 8/15/2023 |
| Nickel | 98 | ND | 94 | - | 0 | 0.01 | 200.7 | RK | 8/15/2023 |
| Silver | 100 | ND | 106 | - | 0 | 0.005 | 200.7 | RK | 8/15/2023 |
| Zinc | 102 | ND | 99 | - | 0 | 0.01 | 200.7 | RK | 8/15/2023 |
| Total Cyanide | 88 | ND | 90 | - | 0 | 0.01 | 4500CN C/E | TP | 8/17/2023 |
| | | | | | | | | | |
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Unit Desc: mg/L = milligrams per liter (ppm),

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

Analysis Certified By

Laboratory Manager

John Ondo

2779 Rockefeller Avenue • Cleveland, Ohio 44115 • (216) 696-0280 • Fax (216) 696-6831

| | | | Sample | Sample Chain of Custody Record | stody | Record | | |
|---|----------------------------------|-----------------------|-------------------------|-------------------------------------|------------------------|-----------------------------|---|-----------------|
| Site Mame: | Material Handling Exchange, Inc. | | Sample chilled/iced | Ves No ers | | Analysis / Preservative | Water & Wastewater Laboratories, Inc. | oratories, Inc. |
| Site Address: | 1001 Hurricane Road | | Temp (C): / 0 | | | I | 2779 Rockefeller Avenue | 1 |
| а. 1 | Franklin, IN 46131 | | Project Name: | er of Co | | | Phone:(216)696-0280 Fax:(216)696-6831 | IZAC |
| Sample Date | Sample Time Comp. | Grab Sam | Sample Location/site ID | | Plastic 80 7 Metals | Plastic 80 Total Cya | Sample Comments | Lab # |
| | Sam pm X | Wastewater Effluent | luent | 1 | X | | For Composite: a sample was collected every | 3-3PG |
| 8-9-23 | 12pm | X Wastewater Effluent | luent | 1 | | X | | 2,200 |
| | | | | - 10 - 10 A - 1 | | | for a total of Shours | 1010 |
| | | | | | | | | |
| | | | | | | | | - |
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| | | | | | | | | |
| | | | | | | | Frenquency = 1/month | |
| | | | | | | | TTO = 1/6months | |
| Sampier(s) (print name(s)-sign below): ANNA (DVV | A (OVV) | | | | | Report to | Report to: Jeremy Baughman | |
| Relinquished by: (sampler signature) | ampler signature) | Date/ | Date/Time: | Received by: (signature or shipper) | ure or sh | hipper) | 1800 Churchman Ave | |
| Kelinquished by: (s | (signature) | 0 8/11/23 | 022/ | Received by: (signature or shippet) | tufe or sh | ipper Aby Phone: Fax: | | |
| winiquisited by. (stgnature) | (graure) | Dáte/ | Dáte/Time: | Received by signature or shipper | ure or sh | httpper) P.O.#: Bill to: | | |
| Relinquished by: (signature) | 'gnature) | Date/Time: | | Received by: (signature or shipper) | ure or sh | | | |
| | | | | | | | | |

| Start Q | MONTHLY Indiana Disc State Form 3053 | char | rge Monitor | | | | R | INDUSTRI | AL D | ISCH | AR | .GE P | ERM | ITS | | | | |
|---|--|------------------|-----------------------|-------------|-----------------|-----------------|------------|--|--|--|----------------------|---|---|--|----------------|-----------|----------------|-------|
| | FACILITY NAME AND Material Handel 1001 Hurricane Franklin Indiana | ling Ex Stree | Exchange, Inc. et | | | | | ONCE (PDF DC (PERM IN001 AND AT FOR SL | COMPLI DCUMEI AITID_(2345_(ITACHE JBMITT/ | ETED, TH NT, NAM DUTFAL D01A_M ED TO TH AL. | HIS I ED / LID | FORM S APPROF D_MMR_ 2019_ CORRES | HOULD PRIATEL _YYYY _01.pdf) PONDIN | ′_MM.pdf, i), NG NETDMF | ERTEI i.e., | d to | | |
| | | | | | | |] | E-mail | addres | is: | | hsstoo | l@m-h∙ | -e.com | | | | |
| I N P | 0 0 | 0 | 6 2 | 7 | ' | 0 0 | | 1 | 1 | 0 | | 8 | 2 | 3 | | | | |
| | PERMIT NUM | BER | <u> </u> | <u> </u> |] ' | OUTF | AL | L NO. | l | | MO | | Ý | /R. | Na | | · | |
| t luman Can a | " -" :f moool | | -t - alua ia la | - 4600 | l'anit e | (| | | | | | | Think | | | | harge | |
| ** < column: Can e | | ireme | ent value is les | | n limit o oH | | <u>~ T</u> | otal [Cn] | | Nicko | <u>' To</u> | tal [Ni] | This is | s a revised | | | I. al [Ag] | |
| EFFLUENT CHARA | | | Q50050 | | 0400 | Q | | 00720 | Q | | ÷ | 1074 | | Q | SIIVEI | - | ai [Ag] 079 | |
| SAMPLE TYPE | Permit Condition | 'n | 24TOT | Grab | 1400 | | <u> </u> | Grab | 9 | | 00 | Com | n | 3 | | 00. | Comp | |
| o, | Monitored | <u> </u> | 24TOT | Grab | | l | ┢ | Grab | | | | Com | | 1 | | | Comp | |
| FREQUENCY | Permit Condition | n | Daily | Meter | | İ | \vdash | Monthly | | | | Month | • | 1 | | | Monthly | |
| | Monitored | | Daily | Daily | | | t | Monthly | | | | Month | nly | <u>† </u> | | <u> </u> | Monthly | / |
| EFFLUENT | Permit Minimum | n | N/A | | 5.0 | | L | N/A | | | | N/A | \ | | | | N/A | |
| LIMITATIONS | Permit Average | | Report | N/A | | | L | 0.02 | | | L | 1.60 | | | | L | 0.24 | |
| | Permit Maximun | | Report | Ē | | | L | 0.02 | | | Ĺ | 1.60 | | <u> </u> | _ | L | 0.43 | |
| | | IITS = | | HI | LOW | LB/DAY | ** | MG/L | LB/ | /DAY | ** | MC | G/L | LB/DA | ١Y | ** | MG/I | L |
| | Tue | 1 | 0.006773 | | | | | | | | | <u> </u> | | | | | | |
| | Wed | 2 | | 7.44 | | L | ┢ | | | | | <u> </u> | | | | \square | | |
| | Thu Fri | 3 | 0.007773 | 7.41 N/A | ' | | H | | ļ | | | | | | | \square | | |
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| | Mon | 7 | | | | | | | | | | | | | | | | |
| | Tue | 8 | | | | | | | | | | | | | | | | |
| | Wed | 9 | | | - | 0.00047099 | < | 0.01 | 0.00 | 141298 | | | 0.03 | 0.0002 | 2355 | < | (| 0.005 |
| | Thu | 10 | | 7.26 | | | | [| | | | | | | | | | |
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| | Mon | 14 | | | - | | | | | | | | | | | | | |
| | Tue | 15 | | | | | | | | | | | | | | | | |
| | Wed | 16 | | | - | | | | | | | <u> </u> | | | | | | |
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| | Sat | |) N/A | N/A | ' | | | | | | | ├─── | | | | H | | |
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| | Wed | 23 | | 7.07 | | | | | | | | | | | | | | |
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| | Mon | 28 | | 7.12 | | | | | | | | | | | | | | |
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| | Wed | 30 | | | | L | | | | | | <u> </u> | | | | \square | | |
| MONTHLY AVERAG | Thu | 31 | | 7.38 | | 0.00047099 | | 0.01 | 0.00 | 4 4 1 2 0 8 | | <u> </u> | 0.03 | 0.000 | 2255 | | (| 0.005 |
| HIGHEST VALUE | <u>, , , , , , , , , , , , , , , , , , , </u> | | 0.00615832 0.02136 | | 7.59 | | | 0.01 | | 141298 141298 | | ┣─── | 0.03 | | | | | 0.005 |
| LOWEST VALUE | | | 0.02130 | | 6.82 | | | 0.01 | | 141298 | | | 0.03 | | | | | 0.005 |
| NO. OF TIMES WEEKI | LY. DAILY, MONTHI | LY | 0.0000 | <u> </u> | 0.01 | 0.0001.001 | | | 0.00 | TILCC | | | 0.00 | 0.000 | -000 | | | 5.000 |
| EFFL. LIMITATIONS | | | | | I | 1 | | | | | | | | | ļ | | | |
| TOTAL FLOW | | | 0.117008 | | Prepa | red by or unde | r th | ne direction of (| Certifie | d Opera | ator |): | | Date (mo | onth. | day. | vear) | |
| I certify under penalty o | of low that this docur | nont a | and all attachment | | | - | | | 00.0 | w . F . | | <i>.</i> | | Butto , | | | | |
| were prepared under m | | | | | Jerer | ny Baughma | зn | | | | | | | | 8/1 | 8/20 |)23 | |
| a system designed to a | | | | | Prepa | rer's telephone | - nı | Imher | | | | Onera | tor's ce | ertification i | numł | her | | |
| and evaluate the inform | | | | | Поры | | i nu | | | | | Opera | .01 3 00 | lineatori | Turns | | | |
| person or persons who | • • | | • | | 317-2 | 213-0178 | | | | | ļ | | | | | | | |
| responsible for gatherin is, to the best of my kno | - | | | 1 | | | 1.01 | | ar out | i - od | 200 | | | Data (mo | - th | 201 | | |
| complete. I am aware th | - | | | l | | | | xecutive officer R subscriber ag | | | aye | nu | | Date (mo | <i>mu</i> , , | ûay, | year) | |
| submitting false informa | • | • | | l | (0) 41 | Colou by Nolo | | | | | | | | | 2/0 | ~ 101 | ~~~ | |
| imprisonment for knowi | | | | | 1 | | | Jeremy Bau | gnma | n | | | | 9/28/2023 | | | | |

MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS Indiana Discharge Monitoring Report State Form 30530 (R4 / 7-19) FACILITY NAME AND ADDRESS: PLEASE COMPLETE ONE COPY FOR EACH

| A THE STATE OF |
|----------------|
| |
| |
| /816 |

knowing violations.

Material Handeling 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. |
| |

No Discharge

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| ** < column: Can e EFFLUENT CHAR/ | | | Zinc, | | | | m, T | otal [Cd] | Lead | ,Tot | al [Pb] | Chromi | um,T | otal [Cr] |
|--------------------------------------|------------------------|---------|-------------------|------|--------|-------------------|-------|------------------|-----------------|------|-----------------------------|-----------------|-----------|-----------|
| EFFLUENT PARAM | METER NUMBER | | | C010 | | Q | C01 | 113 | Q | C0 | 1114 | Q | C01 | 118 |
| SAMPLE TYPE | Permit Conditio | n | | Com | p | | Con | np | | Co | mp | | | Comp |
| | Monitored | | | Com | p | | Con | np | | Co | mp | | | Comp |
| FREQUENCY | Permit Conditio | n | | Mont | thly | | Mor | ithly | | Мо | nthly | | | Monthly |
| | Monitored | | | Mont | thly | | Mor | ithly | | Мо | nthly | | ĺ | Monthly |
| EFFLUENT | Permit Minimur | n | | N/A | | | N/A | | | N/A | Ň | | | N/A |
| LIMITATIONS | Permit Average | | | 1.48 | | | 0.07 | , | | 0.1 | | | | 1.71 |
| | Permit Maximu | | | 2.0 | | | 0.11 | | | 0.1 | 3 | | | 2.77 |
| | | VITS= | LB/DAY | ** | MG/L | LB/DAY | ** | MG/L | LB/DAY | ** | MG/L | LB/DAY | ** | MG/L |
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| | Wed | 9 | | | 0.02 | 0.0002355 | < | 0.005 | 0.00047099 | < | 0.01 | 0.00047099 | < | 0.0 |
| | Thu | 10 | | | | | | | | | | | \square | |
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| | Sat | 19 | | | | | | | | | | | | |
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| MONTHLY AVERA | | | 0.00094198 | | 0.02 | 0.0002355 | | 0.005 | 0.00047099 | | 0.01 | 0.00047099 | | 0.0 |
| HIGHEST VALUE | ~- | | 0.00094198 | | 0.02 | 0.0002355 | | 0.005 | 0.00047099 | | 0.01 | 0.00047099 | | 0.0 |
| LOWEST VALUE | | | 0.00094198 | | 0.02 | 0.0002355 | | 0.005 | | | 0.01 | 0.00047099 | | 0.0 |
| NO. OF TIMES WEEK | | I V | 0.00034130 | H | 0.02 | 0.0002000 | | 0.000 | 0.00041033 | | 0.01 | 0.000+1099 | | 0.0 |
| EFFL. LIMITATION | | - 1 | | | | | | | | | 1 | | | |
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| I certify under penalty of | of law that this docum | nent or | d all attachmente | | riepai | | | | - | UI). | | Date (month, | | |
| were prepared under n | | | | | | | | Jeremy Baug | ghman | | | 8/1 | 8/20 |)23 |
| a system designed to a | | | | | Descr | orlo toloribari - | | | | | Onorotaria | tification arms | her | |
| and evaluate the inform | | | | | Prepar | er's telephone | nuñ | iber | | | Operator's ce | rtification num | ber | |
| person or persons who | | | | | | | | | | | | | | |
| responsible for gatheri | | | | | | | 317 | -213-0178 | | | | | | |
| to the best of my know | - | | | | Signat | ure of principa | eve | cutive officer o | r authorized a | nen | ł | Date (month | dav | vear |
| I am aware that there a | - | | | | | | | subscriber agre | | yen | ent Date (month, day, year) | | | |
| information, including t | | | - | | | | | | | | | | | |
| nowing violations | | .1 | | | | | | Jeremy Baug | gnman | | | 1 | | |

MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report State Form 30530 (R4 / 7-19) FACILITY NAME AND ADDRESS:

FACILITY NAME AND ADDRESS: Material Handeling 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.

| | | | | | | | | FOR | SUBMITTAL. | | | | | | | |
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| EFFLUENT CHAR | | T | | | er [Cu] | | TTC |) | | | | | 1 | | | |
| EFFLUENT PARAM | | | Q | | 1119 | Q | | 8141 | Q | С | | | Q | | С | |
| SAMPLE TYPE | Permit Condition | | | | Comp | | | Grab | | | | | | | 1 | |
| | Monitored | | | | Comp | | | Grab | | | | | | | | |
| FREQUENCY | Permit Condition | n | | | Monthly | | | 2X/Year | | | | | | | | |
| | Monitored | | | | Monthly | | | 2X/Year | | | | | | | Ì | |
| EFFLUENT | Permit Minimum | 1 | | | N/A | | | N/A | | | | | | | 1 | |
| IMITATIONS | Permit Average | | | | 0.31 | | | N/A | | | | | | | 1 | |
| | Permit Maximun | n | | | 0.31 | | | 2.00 | | | | | | | 1 | |
| | | ITS= | LB/DAY | ** | MG/L | LB/DAY | ** | MG/L | LB/DAY | ** | М | G/L | LB/ | DAY | ** | MG/L |
| | Tue | 1 | | | | | | | | | .,, | | | | | |
| | Wed | 2 | | | | | | | | | | | | | | |
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| | Mon | 7 | | | | | | | | | | | | | | |
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| | Wed | 9 | 0.00282595 | | 0.0 | 6 | | | | | | | | | | |
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| | Mon | 28 | | | | | | | | | | | | | | |
| | Tue | 29 | | 7 | | | | | | | | | | | | |
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| | Thu | 31 | | | | | | | | | | | | | | |
| MONTHLY AVERA | GE | | 0.00282595 | | 0.0 | 6 | | | | | | | | | | |
| HIGHEST VALUE | | | 0.00282595 | | 0.0 | | | | | | | | | | | |
| LOWEST VALUE | | | 0.00282595 | | 0.0 | | | | | | | | | | | |
| NO. OF TIMES WEEK | KLY, DAILY, MONTHL | Y. | | | | | | | | | | | | | 1 | |

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.

| Prepare | d by or under the | e direction of (Ce | ertified Operator): | | Date (month, | day, year) |
|---------|-------------------|---------------------------------------|-------------------------|---------------|-----------------|------------|
| | | Jeremy Baug | hman | | 8/18 | 8/2023 |
| Prepare | r's telephone nu | mber | | Operator's ce | rtification num | ber |
| | 31 | 7-213-0178 | | | | |
| | | ecutive officer or subscriber agre | authorized agent ement) | | Date (month, | day, year) |
| | | Jeremy Baug | Ihman | | | |



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

Report Date: August 18, 2023

P.O. #: verbal

page 1 of 2

| Column # | Sample Description | Sample Date | Recd. Date | Sample # |
|----------|-------------------------------|-------------|------------|----------|
| #1 | Wastewater Effluent Composite | 8/9/23 | 8/11/23 | 23-3841 |
| #2 | Wastewater Effluent Grab | 8/9/23 | 8/11/23 | 23-3842 |
| #3 | | 0/0/20 | 0/11/25 | 23-3042 |

| Parameter | #1 | #2 | #3 | Units | Method | MDL |
|-----------------|---------|-------|----|-------|------------|-------|
| Total Metals | | | | - | 200.2 | - |
| Cadmium | <0.005 | - | | mg/L | 200.7 | 0.005 |
| Chromium, total | <0.01 | - | | mg/L | 200.7 | 0.01 |
| Copper | 0.06 | - | | mg/L | 200.7 | 0.01 |
| Lead | <0.01 | - | | mg/L | 200.7 | 0.01 |
| Nickel | 0.03 | - | | mg/L | 200.7 | 0.01 |
| Silver | < 0.005 | - | | mg/L | 200.7 | 0.005 |
| Zinc | 0.02 | - | | mg/L | 200.7 | 0.01 |
| Total Cyanide | _ | <0.01 | | | | |
| | | -0.01 | | mg/L | 4500CN C/E | 0.01 |
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Unit Desc: mg/L = milligrams per liter (ppm), ug/L = micrograms per liter (ppb), mg/Kg = milligrams per Kilograms (ppm) Std = Standard pH units, ng/L = nanograms per liter (ppt), ND= not detected, loss than the Mathed Detection to

Std = Standard pH units, ng/L = nanograms per liter (ppt), ND= not detected, less than the Method Detection Limit-MDL) < = less than (not detected, below listed value), > = greater than (higher than listed value)

| Analysis Certified By | A. Ol | Laboratory Manager |
|-----------------------|-----------|--------------------|
| | John Ondo | |

2779 Rockefeller Avenue • Cleveland, Ohio 44115 • (216) 696-0280 • Fax (216) 696-6831



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

Report Date: August 18, 2023

| P.O. #: | verbal |
|---------|-------------|
| | page 2 of 2 |

| Column # | Sample Description | Sample Date | Recd. Date | Sample # |
|----------|-------------------------------|-------------|------------|----------|
| #1 | Wastewater Effluent Composite | 8/9/23 | 8/11/23 | 23-3841 |
| #2 | Wastewater Effluent Grab | 8/9/23 | 8/11/23 | |
| #3 | | 0/3/23 | 0/11/23 | 23-3842 |

| | | Method | Matrix Spike | Matrix D | uplicate | | | | |
|--------------------------------|-------------------|---------------|--------------------|---------------------------|-----------------------------|-------|----------------|---------|------------------|
| Analytical Batch QA/QC Data | LCS % recovery | Blank mg/L | (MS) % recovery | Spike (MSD) % recovery | Sample (Dup) % Deviation | MDL | Test Method | Analyst | Date Analyzed |
| Total Metals | | | | | | - | 200.2 | RK | 8/14/2023 |
| Cadmium | 98 | ND | 104 | - | 0 | 0.005 | 200.7 | RK | 8/15/2023 |
| Chromium, total | 93 | ND | 96 | - | 0 | 0.01 | 200.7 | RK | 8/15/2023 |
| Copper | 100 | ND | 108 | - | 0 | 0.01 | 200.7 | RK | 8/15/2023 |
| Lead | 98 | ND | 100 | · | 0 | 0.01 | 200.7 | RK | 8/15/2023 |
| Nickel | 98 | ND | 94 | - | 0 | 0.01 | 200.7 | RK | 8/15/2023 |
| Silver | 100 | ND | 106 | - | 0 | 0.005 | 200.7 | RK | 8/15/2023 |
| Zinc | 102 | ND | 99 | - | 0 | 0.01 | 200.7 | RK | 8/15/2023 |
| Total Cyanide | 88 | ND | 90 | - | 0 | 0.01 | 4500CN C/E | TP | 8/17/2023 |
| | | | | | | | | | |
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| | | | | | | | | | |

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

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

Analysis Certified By

Laboratory Manager

2779 Rockefeller Avenue • Cleveland, Ohio 44115 • (216) 696-0280 • Fax (216) 696-6831

John Ondo

| Site Name: | | | Sample Chain of Custody Record | ly Record | | |
|--------------------------------------|----------------------------------|---------------------------------|---|-------------------------------------|---|----------------|
| Cita Addraco. | Material Handling Exchange, Inc. | hange, Inc. Sample chilled/iced | | Analysis / Preservative | Water & Wastewater Laboratories, Inc. | ratories, Inc. |
| SHE AUDIESS. | 1001 Hurricane Road | Temp (C): | | H | Cleveland. Ohio 44115 | J. |
| | rfanklin, IN 46131 | Project Name: | er of Co | | Phone:(216)696-0280 Fax:(216)696-6831 | IT AL |
| Sample Date | Sample Time Comp. Grab | Sample Location/site ID | Numb | 7 Metals Plastic 80 Total Cya | Sample Comments | Lab # |
| | Xin (pm X | Wastewater Effluent | 1 X | | For Composite: a sample was collected every | 79E-E |
| 8-7-23 | 12pm x | Wastewater Effluent | 1 | X | | 2 200 |
| | | | | | for a total of Shours | 101 |
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| | | | | | Frenquency = 1/month | |
| Complet(a) Facility | | | | | TTO = 1/6months | |
| ANA OVE | A COMM': | | 1954 - 1954 - 1954 - 1954 - 1954 - 1954 - 1954 - 1954 - 1954 - 1954 - 1954 - 1954 - 1954 - 1954 - 1954 - 1954 - | Report to | Report to: Jeremy Baughman | |
| Relinquished by: (sampler signature) | ampler signature) | Date/Time: | Received by: (signature or shipper) | - shipper) | 1800 Churchman Ave | |
| Relinquished by: (signature) | gnature) | 0 8/11 /23 / 33 | Received by: (signature or shipper) | shippeth 12/ Phone: | | 3 |
| Kelinquished by: (signature) | gnature) | Date/Time: | Received by (signature or shipper) | | | |
| Relinquished by: (signature) | gnature) | Date/Time: | Received by: (signature or shipper) | shipper) | | |
| | | | | | | |

| STATE OF | MONTHLY MO Indiana Dischar State Form 30530 (R | ge Monitor | | | | R | INDUSTRI | AL D | ISCH | AR | GE PE | RM | ITS | | | |
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| | | | | _ | | | E-mai | l addres | is: | | hsstool@ | ₽m-h | -e.com | | | |
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| | PERMIT NUMBER | | | | OUTI | FAL | L NO. | | | MO | | Y | ′R. | | D . | |
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| SAMPLE TYPE | Permit Condition | 24TOT | Grab | 5400 | 3 | | Grab | Q | | Co | | | Q | | 001 | Comp |
| | Monitored | 24TOT | Grab | | | | Grab | | | 00 | Comp | | | | | Comp |
| FREQUENCY | Permit Condition | Daily | Meter | | | | Monthly | | | | Monthly | / | | | | Monthly |
| | Monitored | Daily | Daily | | | | Monthly | | | | Mothly | | | | | Monthly |
| EFFLUENT | Permit Minimum | N/A | 2 0.1.9 | 5.0 | | | N/A | | | | N/A | | | | | N/A |
| LIMITATIONS | 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 |
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| NO. OF TIMES WEEKL | Y. DAILY. MONTHLY | | | | | | | | | | | | | | | |
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| | f law that this document any direction or supervision | | | Jeren | ny Baughma | an | | | | | | | | 8/1 | 8/20 |)23 |
| | ssure that qualified persor | | | Dropos | er's telephone | יימ נ | mhor | | | | Operato | r'e oo | I | n num | hor | |
| | ation submitted. Based or | | | гтера | | , 11U | | | | | Operato | 1 5 00 | nunuduo | muuni | UGI | |
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| | g the information, the info | | | | 213-0178 | | | | | | | | | | | |
| is, to the best of my kno | wledge and belief, true, a | ccurate, and | | | | | ecutive officer | | | age | nt | | Date (r | nonth, | day, | year) |
| complete. I am aware th | nat there are significant pe | nalties for | | (or att | ested by NetD | MR | subscriber ag | greeme | nt) | | | | | | | |
| | tion, including the possibil | ity of fine and | | | | | Jeremy Bau | Iahma | n | | | | | 9/2 | 8/20 |)23 |
| imprisonment for knowi | ng violations. | | | | | | control Dat | . . | •• | | | | <u> </u> | 5,2 | | |

MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS Indiana Discharge Monitoring Report State Form 30530 (R4 / 7-19) FACILITY NAME AND ADDRESS: PLEASE COMPLETE ONE COPY FOR EACH

| of THE STATE OF |
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TIL

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

| PLEASE COMPLETE ONE COPY FOR EACH MONTH PER OUTFALL. |
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| 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. |
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| EFFLUENT CHARA | CTERISTICS | | Zin | k,Tota | al [Zn] | | Cadmi | ium,T | otal [Cd] | Lead | l,Tot | al [Pb] | Chromit | um,T | otal [Cr] |
| EFFLUENT PARAM | IETER NUMBER | | Q | C0 | 1094 | | Q | C01 | 113 | Q | C0 | 1114 | Q | C0. | 1118 |
| SAMPLE TYPE | Permit Condition | ۱ | | Co | mp | | | Con | np | | Co | np | | | Comp |
| | Monitored | | | Co | mp | | | Con | np | | Co | mp | | | Comp |
| FREQUENCY | Permit Condition | ۱ | | Мо | nthly | | | Mor | nthly | | Мо | nthly | | | Monthly |
| | Monitored | | | Мо | nthly | | | Mor | nthly | | Мо | nthly | | | Monthly |
| EFFLUENT | Permit Minimum | 1 | | N/A | ۰, | | | N/A | | | N/A | \ | 1 | | N/A |
| LIMITATIONS | Permit Average | | | 1.4 | | | | 0.07 | | | 0.1 | | 1 | | 1.71 |
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| I certify under penalty of | | | | | | | | | Jeremy Bau | Jahman | | | 8/1 | 8/2 | 023 |
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| a system designed to a | | | | | | Prepa | rer's telephon | e nun | nber | | | Operator's ce | ertification num | ber | |
| and evaluate the inform | | | | | | | | | | | | | | | |
| person or persons who | | | | | | | | 317 | -213-0178 | | | | | | |
| responsible for gatherin | - | | | | | Circuit 1 | | | | an auth | | l | Dete (| dei | |
| to the best of my know | - | | | | | Signat | ture of principatested by Net | ai exe | | or authorized a | igen | L | Date (month, | uay | year) |
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MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report State Form 30530 (R4 / 7-19) FACILITY NAME AND ADDRESS:

FACILITY NAME AND ADDRESS: Material Handeling 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.

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| | • | | aw that this | | | | | | | Prepare | ed by o | r under | | direction of (C eremy Bau | | | or): | | Date (month 8/1 | , day, 18/20 | |
| | | | direction or | | | | | | | <u> </u> | | <u> </u> | | | ai | - | | <u> </u> | | | |
| a systen | n aesigne | a to ass | sure that qu | allfied p | ersonn | ei prope | eriy gath | er | | Prepare | er's tele | ephone r | numl | ber | | | | Operator's ce | ertification nun | iber | |

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.

(or attested by NetDMR subscriber agreement)

317-213-0178

Signature of principal executive officer or authorized agent

Date (month, day, year)