

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 08/01/23 to 08/31/23

DMR Due Date:09/28/23

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						=	6.82			=	7.59	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								=	0.03	=	0.03	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	1.6 MO AVG	<=	1.6 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
01079	Silver total recoverable	1 - Effluent Gross	0	--	Sample								<	0.005	<	0.005	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	0.24 MO AVG	<=	0.43 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
01094	Zinc, total recoverable	1 - Effluent Gross	0	--	Sample								=	0.02	=	0.02	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	1.48 MO AVG	<=	2.0 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
01113	Cadmium, total recoverable	1 - Effluent Gross	0	--	Sample								<	0.005	<	0.005	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	0.07 MO AVG	<=	0.11 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
01114	Lead, total recoverable	1 - Effluent Gross	0	--	Sample								<	0.01	<	0.01	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	0.13 MO AVG	<=	0.13 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
01118	Chromium, total recoverable	1 - Effluent Gross	0	--	Sample								<	0.01	<	0.01	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	1.71 MO AVG	<=	2.77 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
01119	Copper, total recoverable	1 - Effluent Gross	0	--	Sample								=	0.06	=	0.06	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	0.31 MO AVG	<=	0.31 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0	--	Sample	=	0.00615832	=	0.02136	03 - MGD									01/01 - Daily	TM - TOTALZ
					Permit Req.		Req Mon MO AVG		Req Mon DAILY MX	03 - MGD									01/01 - Daily	TM - TOTALZ
					Value NODI															

Submission Note

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

Edit Check Errors

No errors.

Comments

Attachments

Name	Type	Size
------	------	------

Analytical_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		
E-Mail:	hsstool@m-h-e.com		
Date/Time:	2023-09-28 14:36 (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 14:36 (Time Zone: -04:00)		

DMR Copy of Record

Permit

Permit #:

INP000627

Major:

No

Permittee:

MATERIAL HANDLING EXCHANGE, INC.

Permittee Address:

1001 HURRICANE ST
FRANKLIN, IN 46131

Facility:

MATERIAL HANDLING EXCHANGE, INC.

Facility Location:

1001 N HURRICANE ST
FRANKLIN, IN 46131

Permitted Feature:

002
External Outfall

Discharge:

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

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Principal Executive Officer

First Name:

Joe

Last Name:

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Title:

operations manager

Telephone:

317-361-6434

No Data Indicator (NODI)

Form NODI:

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Comments

Attachments

Name	Type	Size
------	------	------

Analytical_20230818_140149.pdf		pdf	1181230.0
INP000627_002A_MMR_2023_8.pdf		pdf	377133.0
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)		



page 1 of 2

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, less than the Method Detection Limit-MDL
< = less than (not detected, below listed value), > = greater than (higher than listed value)

John Ondo



page 2 of 2



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	8	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
	Tue	1	0.006773	7.37									
	Wed	2	0.00581	7.44									
	Thu	3	0.007773	7.41									
	Fri	4	N/A	N/A									
	Sat	5	N/A	N/A									
	Sun	6	N/A	N/A									
	Mon	7	0.003866	7.32									
	Tue	8	0.006192	7.36									
	Wed	9	0.005644	7.29	0.00047099	<	0.01	0.00141298	0.03	0.0002355	<	0.005	
	Thu	10	0.005408	7.26									
	Fri	11	N/A	N/A									
	Sat	12	N/A	N/A									
	Sun	13	N/A	N/A									
	Mon	14	0.005859	7.26									
	Tue	15	0.00394	7.22									
	Wed	16	0.003778	7.39									
	Thu	17	0.003378	7.36									
	Fri	18	N/A	N/A									
	Sat	19	N/A	N/A									
	Sun	20	N/A	N/A									
	Mon	21	0.02136	7.59									
	Tue	22	0.005692	7.37									
	Wed	23	0.005362	7.07									
	Thu	24	0.007116	6.82									
	Fri	25	N/A	N/A									
	Sat	26	N/A	N/A									
	Sun	27	N/A	N/A									
	Mon	28	0.005182	7.12									
	Tue	29	0.00437	6.89									
	Wed	30	0.005226	7.11									
	Thu	31	0.004279	7.38									
MONTHLY AVERAGE		0.00615832			0.00047099		0.01	0.00141298	0.03	0.0002355			0.005
HIGHEST VALUE		0.02136	7.59		0.00047099		0.01	0.00141298	0.03	0.0002355			0.005
LOWEST VALUE		0.003378	6.82		0.00047099		0.01	0.00141298	0.03	0.0002355			0.005
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED													

TOTAL FLOW 0.117008

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		8/18/2023
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		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:

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	8	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
	Tue 1									
	Wed 2									
	Thu 3									
	Fri 4									
	Sat 5									
	Sun 6									
	Mon 7									
	Tue 8									
	Wed 9	0.00094198		0.02	0.0002355	<	0.005	0.00047099	<	0.01
	Thu 10									
	Fri 11									
	Sat 12									
	Sun 13									
	Mon 14									
	Tue 15									
	Wed 16									
	Thu 17									
	Fri 18									
	Sat 19									
	Sun 20									
	Mon 21									
	Tue 22									
	Wed 23									
	Thu 24									
	Fri 25									
	Sat 26									
	Sun 27									
	Mon 28									
	Tue 29		7							
	Wed 30									
	Thu 31									
MONTHLY AVERAGE		0.00094198		0.02	0.0002355		0.005	0.00047099		0.01
HIGHEST VALUE		0.00094198		0.02	0.0002355		0.005	0.00047099		0.01
LOWEST VALUE		0.00094198		0.02	0.0002355		0.005	0.00047099		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)

8/18/2023

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	1	
OUTFALL NO.			

0	8	2	3
MO.		YR.	

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

No Discharge ☐
This is a revised submittal. ☐

EFFLUENT CHARACTERISTICS		Copper [Cu]			TTO								
EFFLUENT PARAMETER NUMBER		Q	C01119		Q	C78141		Q	C		Q	C	
SAMPLE TYPE	Permit Condition		Comp			Grab							
	Monitored		Comp			Grab							
FREQUENCY	Permit Condition		Monthly			2X/Year							
	Monitored		Monthly			2X/Year							
EFFLUENT LIMITATIONS	Permit Minimum		N/A			N/A							
	Permit Average		0.31			N/A							
	Permit Maximum		0.31			2.00							
UNITS=		LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L
	Tue 1												
	Wed 2												
	Thu 3												
	Fri 4												
	Sat 5												
	Sun 6												
	Mon 7												
	Tue 8												
	Wed 9	0.00282595		0.06									
	Thu 10												
	Fri 11												
	Sat 12												
	Sun 13												
	Mon 14												
	Tue 15												
	Wed 16												
	Thu 17												
	Fri 18												
	Sat 19												
	Sun 20												
	Mon 21												
	Tue 22												
	Wed 23												
	Thu 24												
	Fri 25												
	Sat 26												
	Sun 27												
	Mon 28												
	Tue 29		7										
	Wed 30												
	Thu 31												
MONTHLY AVERAGE		0.00282595		0.06									
HIGHEST VALUE		0.00282595		0.06									
LOWEST VALUE		0.00282595		0.06									
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED													

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

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Jeremy Baughman

Date (month, day, year)

8/18/2023

Preparer's telephone number

317-213-0178

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

Jeremy Baughman

Date (month, day, year)



page 1 of 2

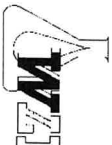
Unit Desc: mg/L = milligrams per liter (ppm), ug/L = micrograms per liter (ppb), mg/Kg = milligrams per Kilograms (ppm)
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< = less than (not detected, below listed value), > = greater than (higher than listed value)

John Ondo



page 2 of 2

Sample Chain of Custody Record

Site Name: Material Handling Exchange, Inc.			Sample chilled/iced Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Water & Wastewater Laboratories, Inc. 2779 Rockefeller Avenue Cleveland, Ohio 44115 Phone: (216) 696-0280 Fax: (216) 696-6831	
Site Address: 1001 Hurricane Road Franklin, IN 46131			Temp (C): 19.0			
Project Name:			Number of Containers		Analysis / Preservative	
Sample Date			Sample Time		Sample Location/site ID	
Comp.			Grab		Plastic 8oz w/HNO3 7 Metals	
Sample			Wastewater Effluent		Plastic 8oz w/NaOH Total Cyanide	
Date			Wastewater Effluent		for a total of	
Time			1		60 minutes	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
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Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
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Comp.			1		23-3842	
Grab			1		23-3842	
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Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
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Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
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Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
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Sample			1		23-3842	
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Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1		23-3842	
Date			1		23-3842	
Time			1		23-3842	
Comp.			1		23-3842	
Grab			1		23-3842	
Sample			1			



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

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

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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.

I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	2	
OUTFALL NO.			

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

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

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

Jeremy Baughman

Date (month, day, year)

8/18/2023

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

Indiana Discharge Monitoring Report

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FOR SUBMITTAL.

I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	2	
OUTFALL NO.			

0	8	2	3
MO.		YR.	

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

No Discharge ☒ This is a revised submittal.

EFFLUENT CHARACTERISTICS		Copper[Cu]		TTO						
EFFLUENT PARAMETER NUMBER		Q	C01119	Q	C78141	Q	C	Q	C	
SAMPLE TYPE	Permit Condition		Comp		Grab					
	Monitored		Comp		Grab					
FREQUENCY	Permit Condition		Monthly		2X/Year					
	Monitored		Monthly		2X/Year					
EFFLUENT LIMITATIONS	Permit Minimum		N/A		N/A					
	Permit Average		0.31		N/A					
	Permit Maximum		0.31		2.00					
UNITS=		LB/DAY	**	MG/L	LB/DAY	**	MG/L	LB/DAY	**	MG/L
	Tue 1									
	Wed 2									
	Thu 3									
	Fri 4									
	Sat 5									
	Sun 6									
	Mon 7									
	Tue 8									
	Wed 9									
	Thu 10									
	Fri 11									
	Sat 12									
	Sun 13									
	Mon 14									
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	Wed 16									
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	Tue 22									
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	Thu 24									
	Fri 25									
	Sat 26									
	Sun 27									
	Mon 28									
	Tue 29									
	Wed 30									
	Thu 31									
MONTHLY AVERAGE										
HIGHEST VALUE										
LOWEST VALUE										
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED										

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