INDIANA ENVIRONMENTAL STEWARDSHIP PROGRAM ANNUAL PERFORMANCE REPORT

State Form 53475 (R / 11-09)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
ENVIRONMENTAL STEWARDSHIP PROGRAM

Indiana Department of Environmental Management
Office of Pollution Prevention and Technical Assistance
100 North Senate Avenue
MC 64-00, Room IGCS W041
Indianapolis, IN 46204-2251
Telephone: (800) 988-7901
FAX: (317) 233-5627
E-mail: esp@idem.IN.gov
www.IN.gov/idem/4132.htm

INSTRUCTIONS: Please use this annual report form if you are a member of the Indiana Environmental Stewardship Program (ESP). Your annual performance report should be reviewed and signed by a senior manager at your facility prior to submittal. Once signed, FAX, mail, or e-mail the report to IDEM. If you have any questions, please contact the ESP program manager at 1-800-988-7901.

The Indiana ESP annual performance report should demonstrate progress toward objectives and targets AND certify ESP requirements continue to be achieved. Your annual performance report should cover the previous twelve (12) month calendar year and include the status of projects committed to in your facility's original ESP application, results of completed projects, and assurance that an annual internal environmental management system audit was conducted by your facility. Indiana ESP facilities must submit this annual performance report by April 1st of every year, for each calendar year in which the entity has been a member for at least three (3) full months.

Please do not include any confidential business information in your annual performance report. Public access laws require IDEM to make the Annual Performance Report publicly available, which may include posting all portions of your report on the Indiana ESP Web site.

SECTION A — FACILITY INFORMATION

Name of facility
Madison Chemical Co., INc.

Name of parent company (*If applicable*)

Street address *(number and street)*
3141 Clifty Drive

City / State / ZIP code
Madison, IN 47250

Facility/Company Web site
www.madchem.com

CONTACT INFORMATION

Contact name (Mr. / Mrs. / Ms. / Dr.)
Mrs. Cara Cyrus

Title
Safety, Health and Environmental Manager

Telephone number
812-273-6000

FAX number
812-273-6002

E-mail address
cara.cyrus@madchem.com

Mailing address (*if different from facility address*)

City / State / ZIP Code

REPORTING PERIOD

Reporting period dates (*month, day, year*)
CY 2009

1a. Is this the third Annual Performance Report of your membership term?
☐ Yes—If yes, answer question 1b.
☒ No—If no, skip to the "Change in Information" section of this report.

1b. Do you wish to renew your Indiana Environmental Stewardship Program membership?
☐ Yes—If yes, please complete all sections of this annual report.
☐ No—If no, please complete all sections of this annual report except for Section D.

CHANGE IN INFORMATION

In your ESP application and, perhaps, in previous annual performance reports, you described what your facility does or makes. Have there been any changes or additions to your facility's list of products or activities?

☐ Yes
☒ No
If yes, please describe them:

SECTION B — ENVIRONMENTAL MANAGEMENT SYSTEM ASSESSMENT

Why do we need this information?
IDEM needs information on the performance and assessment of your Environmental Management System (EMS).

What do you need to do?
Please summarize your facility's EMS assessments. Attach additional documents if more space is needed.

1. Is your facility currently registered to a recognized third-party EMS standard?

☒ Yes—If yes, when was an EMS audit or other assessment last conducted by an independent third party at your facility?

Type (e.g., ISO 14001 certification) 12 Month Surveillance Audit

Scope of the audit The registration covers the Environmental Management System for the design, manufacture, and sale of specialty chemicals as defined by customer needs.

Month / year October 2009

☐ No—If no, when was an internal or corporate EMS audit last conducted at your facility?

Scope of the audit _____

Month / year _____

2. When did your facility last conduct an internal or corporate environmental compliance audit? Do not include inspections or site visits by regulatory organizations.

Scope of the audit Internal EMS Audit

Month(s) / Year(s) July 2009

Who conducted the audit(s) (e.g., facility staff, corporate, third party) Facility Staff

3. (Optional) Please describe any other audits that were conducted at your facility.

4. Has your facility corrected all instances of potential environmental non-compliance and EMS non-conformance identified during your audits and other assessments?

☐ Yes—If yes, briefly summarize corrective actions taken and other improvements made as a result of your EMS assessment(s) or compliance audit(s).

☐ No—If no, please explain your plans to correct these instances.

☒ No such instances identified.

5. Explain the emergencies experienced within the facility during the past year. Were the applicable emergency and contingency plans detailed in the EMS effective? What changes, if any, have been made to your facility's emergency or contingency plans? There have been no emergencies at Madison Chemical in the past year.

6. When was the last Senior Management review of your EMS completed?

Month / Year October 2009

Who headed the review? Name and title Dick Goodman, President

7. When did your facility last conduct a systematic identification or review of your environmental aspects?

Month/Year March 2010

8. (Optional) Please provide a narrative summary of progress made toward EMS objectives and targets other than those reported as an Environmental Performance Initiative in Section C. You may limit the summary to environmental aspects that are *significant* and towards which *progress* has been made during the last calendar year. Attach additional sheets as necessary.

Environmental aspect	Progress made this year (e.g., quantitative or qualitative improvements, activities conducted)

SECTION C — ENVIRONMENTAL IMPROVEMENT INITIATIVE RESULTS

Why do we need this information?
Facilities need to share the results of the environmental improvement initiative that was pursued during the reporting period.

What do you need to do?
Summarize your facility's progress on achieving the initiative you identified in the application or last year's Annual Performance Report.

Category Discharges to Water Indicator BOD	Baseline Quantity	Future Goal Quantity	Current Quantity	Cost Savings
Calendar year	2007	2009	2009	
Actual quantity (per year)	252,948	126,474	52,014	
Normalized quantity (per year)	252,948	150,504	61,896	
Basis for your normalizing factor (e.g., gallons of paint produced)	Pounds of Chemical Product Produced			
Measurement unit (e.g., pounds)	Pounds			

Briefly describe how you achieved improvements for this environmental initiative or, if relevant, any circumstances that delayed progress.
We upgraded our WWT process by installing additional tanks to allow for longer, more effective treatment. Additional training and jar testing has helped accomplish this goal

Please list any state, U.S. EPA, or other partnership programs to which you are reporting this data (e.g., Energy Star, Project XL).
Indiana Partners for Pollution Prevention

(Optional) If your facility has experienced continued results for environmental improvement initiatives pursued in past years of ESP membership, please share those results here.
These numbers are different than what we had proposed, I had incorrectly calculated the pounds of BOD discharged in 2007 in the application.

SECTION D — ENVIRONMENTAL IMPROVEMENT INITIATIVES

Why do we need this information?
Facilities need to show they are committed to improving their environmental performance.

What do you need to do?
Identify your facility's next environmental improvement initiative. Refer to the Environmental Performance Table and answer the following questions.

1a. What **category** have you selected from the Environmental Performance Table? Dicharges to water

1b. What **indicator** have you selected from the Environmental Performance Table? Total Suspended Solids

1c. All measurements should represent the performance level for the indicator across the entire facility. For many indicators, you may choose to focus your initiative on a specific subset of the indicator (e.g., a specific material, process, VOC, group of toxic air emissions, or particular waste component). Does your initiative include everything covered by the indicator (e.g., all VOCs, all non-hazardous waste), or a specific process, substance, or component (e.g., ethane, cardboard)?

☒ All

☐ Specific

If your initiative is specific to a substance or component, please provide additional detail on your indicator (e.g., specific chemical to be reduced, specific waste component). _____

1d. What activities or process changes do you plan to undertake at your facility to accomplish your initiative (e.g., technology changes in a particular process line, employee training)? We will continue the improvements to our WWT plant and train

2. Does this initiative address a significant aspect in your EMS?

☒ Yes

☐ No—please explain why you believe this indicator should be included as an environmental improvement initiative: _____

3. Are you subject to Federal, State, tribal, or local regulatory requirements for this indicator?

☒ Yes—please explain how your initiative exceeds regulatory requirements: Our WWT Permit allows for 400lbs of TSS a day. We are already below this limit and intend on lowering it even more.

☐ No

Stop! *If the category listed in Question 1a is Energy Use, Waste, or Air Emissions for Total Greenhouse Gases, please skip Questions 4a – 4b below and turn to Appendix 1 to complete the questions pertaining to the category you listed in Question 1a. After completing the respective table in Appendix 1, return to this section and complete questions 5 and 6. Otherwise, continue answering questions 4-6 below.*

4a. What units are you using to quantify this indicator? pounds

4b. List the baseline annual quantity of the indicator and the annual quantity you are committing to achieve by the future year.

58540 Baseline quantity — Year 2008

25000 Future year quantity (not including production) — Year 2010

5. Does the quantity presented in the future quantity column represent an absolute goal or a normalized goal?

☒ Normalized goal (i.e., indexed to level of business in baseline year)

☐ Absolute goal (i.e., demonstrates improvement even if production increases)

6. Whether your goal is absolute or normalized, you need to provide normalizing factors and normalized quantities in your annual performance reports. Please briefly describe your basis for normalizing. Examples of potential normalizing basis include: gallons of paint produced, square feet of circuit boards sold, number of patients seen, dollars of sales adjusted for inflation, or number of employees (for R&D and administrative sites only).

Pounds of Chemical Product Produced

SECTION E — PUBLIC OUTREACH AND PERFORMANCE REPORTING

Why do we need this information?
IDEM needs to know how environmental

What do you need to do?
Describe how the facility has shared and

information was shared with the public. plans to share environmental information.

Please briefly describe the activities that your facility conducted during this reporting period to interact with the community on environmental issues and to report publicly on its environmental performance.

We are active participants with the Indiana Partners for Pollution Prevention. We also maintain memberships with the Madison Area Safety, Health and Environmental Roundtable and the Jefferson County Local Emergency Planning Committee

Please indicate which of the following methods your facility plans to use to make its ESP Annual Performance Report available to the public. Please check as many as appropriate.

☐ Web site (http://www._____) ☐ Open house ☐ Meetings ☐ Press releases ☐ Community advisory panel

☒ Other Available upon request

SECTION F ADDITIONAL INFORMATION

Why do we need this information?
This information will help IDEM to effectively manage the Environmental Stewardship Program.

What do you need to do?
Answer the questions as completely as possible.

1. In addition to ESP, please list environmental awards received or voluntary programs participated in during the past twelve months.
   Indiana Partners for Pollution Prevention

2. Has your facility taken advantage of any ESP incentives? If so, please describe the implementation process and list additional benefits IDEM should consider.
   No

3. If your facility was not registered to the ISO 14001 standard prior to becoming an ESP member, has ESP helped you to pursue registration? If so, how has ESP been instrumental in achieving registration?

CERTIFICATION AND PLEDGE

On behalf of (*name of facility*) Madison Chemical Co., Inc.

I certify that the information contained in this Annual Performance Report and attachments is accurate to the best of my knowledge and that this facility is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with all applicable federal, state, and local environmental requirements, or has a corrective action program in place to attain compliance.

We, Madison Chemical Co., Inc., commit to maintaining the principles and goals outlined in our Environmental Management System for our facility's Indiana Environmental Stewardship Program status. We agree to strive for full compliance with all regulations promulgated by the U.S. EPA, state, or local jurisdictions. We agree to promote the Indiana Environmental Stewardship Program and to share our success stories with other facilities. We understand that the Annual Performance Report must be submitted to IDEM by April 1st of each year and that we must reapply to the Indiana Environmental Stewardship Program every three years.

I understand that the information provided in this Annual Performance Report will be public record. I am the senior facility manager or authorized facility signatory, and fully authorized to execute this statement on behalf of the corporation or other legal entity whose facility is submitting this Annual Performance Report.

Signature	Title	Date (month, day, year)
Michael Craig	Vice President	April 6, 2010

Printed signature
Michael Craig

Please mail, fax, or e-mail your completed Environmental Stewardship Program Annual Performance Report to:

IDEM-OPPTA
ESP Program Manager
MC 64-00, Room IGCS W041
100 North Senate Avenue
Indianapolis, IN 46204-2251

FAX: 317-233-5627
E-mail: esp@idem.IN.gov