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**INDIANA ENVIRONMENTAL STEWARDSHIP PROGRAM
ANNUAL PERFORMANCE REPORT**

State Form 53475 (R3 / 1-11)

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
ENVIRONMENTAL STEWARDSHIP PROGRAM**

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

Please use this form if you are a member of the Indiana Environmental Stewardship Program (ESP) to report on progress toward objectives and targets AND certify ESP requirements continue to be achieved. Indiana ESP facilities must submit an Annual Performance Report (APR) 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. Section C of your APR should be signed by your ISO 14001:2004 EMS Lead Auditor. Your APR should be reviewed and signed by a senior manager at your facility prior to submittal. Once signed, e-mail the APR to IDEM at esp@idem.IN.gov. Please do not include any confidential business information in your annual performance report. Public access laws require IDEM to make the APR publicly available, which may include posting all portions of your report on the Indiana ESP Web site. If you have any questions, please contact IDEM at esp@idem.IN.gov or (800) 988-7901.

SECTION A**FACILITY INFORMATION**

Name of facility

Covanta Indianapolis, Inc.

Name of parent company (If applicable)

Covanta Holding Corporation

Street address (number and street)

2310 South Harding Street

City / State / ZIP code

Indianapolis, IN 46221

Web site of Facility/Company

Covanta Holding. com

CONTACT INFORMATION

Name of Contact (Mr. / Mrs. / Ms. / Dr.)

Mr. Thomas A. Wehrenberg

Title

Environmental Compliance Specialist

Telephone number

317-532-6712

FAX number

317-637-9864

E-mail address

twehrenberg@covantaenergy.com

Mailing address (if different from facility address)

City / State / ZIP Code

REPORTING PERIOD

Reporting period dates (month, day, year)

January 1, 2011 to December 31, 2011

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 F.**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—If yes, please describe them: A Liquid Direct Inject Program was added to the Facility in 2011.☐ No**SECTION B****PUBLIC OUTREACH AND PERFORMANCE REPORTING**

Why do we need this information?

IDEM needs to know how environmental information was shared with the public.

What do you need to do?

Describe how the facility has shared and 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 provided Plant Tours to many outside groups during 2011. Tom Wehrenberg, Environmental Specialist with Covanta Indianapolis, Inc. joined a local Community Outreach Organization in 2011 called the West Indianapolis Community Advisory Panel.

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 ☒ Other (Plant Tours)

SECTION C**ENVIRONMENTAL MANAGEMENT SYSTEM ASSESSMENT****Why do we need this information?**

Facilities need to have implemented an EMS that meets certain criteria and use an ISO 14001:2004 EMS Lead Auditor at least every 36 months to assess the EMS.

What do you need to do?

Answer the following questions about your EMS.

1. What is the most recent date that an ISO 14001:2004 EMS Lead Auditor performed an EMS assessment at your facility? _____
2. Is the date of the most recent EMS assessment performed by an ISO 14001:2004 EMS Lead Auditor within the past 36 months?
- ☒ Yes—If yes, skip to Question 3.
- ☐ No—If no, please have your ISO 14001: 2004 EMS Lead Auditor complete and sign the following checklist, indicating whether or not your EMS meets the listed criteria for ESP membership:
- ☐ Yes ☐ No Evidence of senior management support, commitment, and approval.
- ☐ Yes ☐ No A written environmental policy directed toward compliance, pollution prevention, and continuous improvement.
- ☐ Yes ☐ No Identification of the environmental aspects at the entity.
- ☐ Yes ☐ No Prioritization of the environmental aspects and a determination of those aspects deemed significant considering, at the minimum, environmental impacts and applicable laws and regulations.
- ☐ Yes ☐ No Established priorities, and environmental objectives and targets for continuous improvement in environmental performance and for ensuring compliance with applicable environmental laws, regulations, and permit conditions. Objectives and targets must go beyond current legal requirements and specify the environmental media, types of pollution to be prevented or reduced, implementation activities, and projected time frames.
- ☐ Yes ☐ No An established community outreach mechanism that includes identifying and responding to community concerns; informing the community of important matters that affect the community; and reporting on the EMS, including reporting to the public on the environmental policy and significant aspects.
- ☐ Yes ☐ No Incorporation of environmental and pollution prevention planning in the development of new products, processes, and services and modifications of existing processes.
- ☐ Yes ☐ No Evidence of clear responsibility for implementation, training, monitoring, EMS maintenance, taking corrective action, and ensuring compliance with applicable environmental laws, regulations, and permit conditions.
- ☐ Yes ☐ No Documentation of the implementation procedures and the results of implementation.
- ☐ Yes ☐ No Appropriate written EMS procedures.
- ☐ Yes ☐ No An annual evaluation of the EMS with written results provided to senior management and affected employees.

Signature of ISO 14001:2004 EMS Lead Auditor

Date (month, day, year)

3. Were any deficiencies found during the most recent EMS assessment?
- ☒ No—If no, skip to Question 4.
- ☐ Yes—If yes, describe any deficiencies found and the corrective action taken to address each deficiency: _____
4. Name, title, and organization of ISO 14001:2004 EMS Lead Auditor that conducted the most recent EMS assessment: Pamela Copper Griesemer
5. What type of protocol was used to perform the independent EMS assessment?
- ☐ ISO 14001:2004 Certified audit
- ☐ Responsible Care EMS audit
- ☐ Responsible Care 14001 audit
- ☒ ESP Independent Assessment Protocol
- ☐ Other (please specify): _____
6. Is the EMS certified to a recognized standard?
- ☐ Yes—If yes, what standard does the EMS follow (please provide a copy of the most recent certificate)?
- ☐ ISO 14001:2004
- ☐ Responsible Care EMS
- ☐ Responsible Care 14001
- ☒ No.
7. When was the last Senior Management review of your EMS completed?
- Month / Year: July 29, 2011
- Who headed the review (name and title)? Joseph Miller, Facility Manager

8. 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 compliance audit: Internal Audit

Month(s) / Year(s): November 11, 2011

Who conducted the audit(s) (e.g., facility staff, corporate, third party)? Thomas A. Wehrenberg, CHMM, Environmental Compliance Specialist

9. 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?

None, we have made no changes in our Emergency or Compliance Plans.

10. 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.

11. (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 E. 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 D 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.

Covanta Indianapolis, Inc. became a member of the Stewardship Action Council in the fall of 2011.

2. Has your facility taken advantage of any ESP incentives? If so, please describe the implementation process and list additional benefits IDEM should consider.

NA

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?

NA

SECTION E 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 APR.

Category:	Baseline Quantity	Future Goal Quantity	Current Quantity	Cost Savings
Indicator: <u>WATER USE</u> <u>TOTAL WATER USED - Pilot Project, CRO, (R.O. Project)</u>			763,421,000	
Calendar year	2010	2011	2011	
Actual quantity (per year)	771,394,490	763,421,000	7,973,490	\$12,757.00/year (Potable Savings)
Normalized quantity (per year)			10.7 Gallons / ton	\$31,095.00/year (Wastewater Savings)
Basis for your normalizing factor (e.g., gallons of paint produced)	Potable water saved from having to be purchased from the City of Indianapolis.			
Measurement unit (e.g., pounds)	Gallons			Grand Total Savings = \$43,852.00

* Briefly describe how you achieved improvements for this environmental initiative or, if relevant, any circumstances that delayed progress.

The new Concentrated Recovery Reverse Osmosis Project is a "Pilot Program" designed to reduce the need for the facility to purchase potable water (Drinking Water) from the City of Indianapolis resulting in a substantial cost savings if the larger "Full Scale" Project is implemented. This project also reduces the amount of wastewater discharged by Covanta Indianapolis, Inc. to the local POTW.

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

The Stewardship Action Council.

(Optional) If your facility has experienced continued results for environmental improvement initiatives pursued in past years of ESP membership, please share those results here.

SECTION F

ENVIRONMENTAL IMPROVEMENT INITIATIVE

Why do we need this information?

Facilities need to show they are committed to improving their environmental performance.

What do you need to do?

Refer to the Environmental Performance Table and answer the following questions.

1. Select the appropriate boxes in the following table to indicate the category and indicator(s) that represents the environmental improvement initiative selected by your facility. For the category and indicator selected, list the baseline year (e.g., 2009) and the future year (e.g., 2010). Next, list the baseline annual quantity (e.g., 5 tons) and future annual quantity (e.g., 2 tons) you are committing to achieve by the end of the future year.

Category	Indicator	Baseline Year 2011	Future Year 2012	Unit
<input type="checkbox"/> Material Procurement	<input type="checkbox"/> Recycled content			Pounds, tons
	<input type="checkbox"/> Hazardous/toxic components			Pounds, tons
<input type="checkbox"/> Suppliers' Environmental Performance	<input type="checkbox"/> Specify indicator: _____			As specified for the particular indicator
<input type="checkbox"/> Material Use	<input type="checkbox"/> Materials used			Pounds, tons
	<input type="checkbox"/> Hazardous materials used			Pounds, tons
	<input type="checkbox"/> Ozone depleting substances used			CFC-11 equivalent pounds
	<input type="checkbox"/> Total packaging materials used	763,421,000		Pounds, tons
<input checked="" type="checkbox"/> Water Use "Full Scale" PROJECT Regarding R.O. REJECT WASTEWATER	<input checked="" type="checkbox"/> Total water used	771,394,490	691,394,490	Gallons
	<input type="checkbox"/> Electricity			kWh / MWh, Btu / MMBtu
	<input type="checkbox"/> Steam			kWh / MWh, gallons, ft ³
	<input checked="" type="checkbox"/> Natural gas			Btu / MMBtu
	<input type="checkbox"/> Diesel			Gallons
	<input type="checkbox"/> Propane / LPG			Btu / MMBtu, gallons
	<input type="checkbox"/> Gasoline			Gallons
	<input type="checkbox"/> Solar			kWh / MWh
	<input type="checkbox"/> Wind			kWh / MWh
	<input type="checkbox"/> Landfill gas			Btu / MMBtu
	<input type="checkbox"/> Combined heat and power			kWh / MWh, Btu / MMBtu
	<input type="checkbox"/> Other: _____			
	<input type="checkbox"/> Land and habitat conservation			Square feet, acres
	<input type="checkbox"/> Community land revitalization			Square feet, acres
<input type="checkbox"/> Air Emissions	<input type="checkbox"/> Total GHGs			MTCO2E
	<input type="checkbox"/> VOCs			Pounds, tons
	<input type="checkbox"/> NOx, SOx, PM _{2.5} , PM ₁₀ , or CO			Pounds, tons
	<input type="checkbox"/> Air toxics			Pounds, tons
	<input type="checkbox"/> Odor			European Odour Units
	<input type="checkbox"/> Radiation			Curies, Becquerels
	<input type="checkbox"/> Dust			Pounds, tons
	<input type="checkbox"/> COD or BOD			Pounds, tons
<input type="checkbox"/> Discharges to Water	<input type="checkbox"/> Toxics			Pounds, tons
	<input type="checkbox"/> Total suspended solids			Pounds, tons
	<input type="checkbox"/> Nutrients			Pounds, tons of N or P
	<input type="checkbox"/> Sediment from runoff			Pounds, tons
	<input type="checkbox"/> Pathogens			MPN/ml, CFU/ml
	<input type="checkbox"/> Landfill			Pounds, tons
<input type="checkbox"/> Non-hazardous Waste <input type="checkbox"/> Hazardous Waste	<input type="checkbox"/> Incineration			Pounds, tons
	<input type="checkbox"/> Reused/recycled off-site			Pounds, tons, gallons
	<input type="checkbox"/> Other: _____			Pounds, tons, gallons
<input type="checkbox"/> Noise	<input type="checkbox"/> Noise			dBA
<input type="checkbox"/> Vibration	<input type="checkbox"/> Vibration			Inches per second
<input type="checkbox"/> Products	<input type="checkbox"/> Expected lifetime energy use			kWh / MWh, Btu / MMBtu
	<input type="checkbox"/> Expected lifetime water use			Gallons
	<input type="checkbox"/> Expected lifetime waste to air, water, or land from product use			Pounds, tons
	<input type="checkbox"/> Waste to air, water, or land from disposal or recovery			Pounds, tons

2. 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)?

THE PLANT'S 2012 INDIANA ESP PROJECT INVOLVES THE INSTALLATION OF A FULL SCALE PROJECT TO DEMONSTRATE THE EFFECTIVENESS OF THE REVERSE OSMOSIS REJECT WASTEWATER PROJECT. THE FULL SCALE PROJECT REDUCES THE NEED FOR THE FACILITY TO PURCHASE 80,000,000 GALLONS OF POTABLE WATER FROM THE CITY EACH YEAR (SEE THE ATTACHED INFORMATION)

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

☒ Yes

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

CERTIFICATION AND PLEDGE

On behalf of (name of facility) Covanta Indianapolis, 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, Covanta Indianapolis, 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)

Facility Manager

March 27, 2012

Printed signature
Joseph Miller

Covanta Indianapolis, Inc.

**Pilot Program for the “Concentrated Recovery Reverse Osmosis”
(CRRO) Project, (R.O. Re-ject Wastewater)**

***Potable Water Saved**

Baseline - 771,394,490 Gallons or 1.041 Gallons/Ton/Processed

**Goal Quantity - 763,421,000 Gallons or 1.030
Gallons/Ton/Processed**

**Current Quantity - 7,973,490 Gallons X .00164/Gallon = \$12,757.00
Saved**

Normalized

**Gallons Per Ton Processed = 10.7 (For Both “Potable Water Saved”
and “Wastewater not discharged” to local POTW)**

***Wastewater not discharged to local POTW**

Baseline - 178,264,490 or 240 Gallons/Ton/Processed

Goal Quantity - 170,291,000 or 230 Gallons/Ton/Processed

**Current Quantity - 7,973,490 X .0039/Gallon = \$31,095
Saved**

**Grand Total/Bottom Line for “Pilot Program” = \$12,757.00
+\$31,095.00
\$43,852.00**

Covanta Indianapolis, Inc.

**Full Scale Program for the “Concentrated Recovery Reverse Osmosis”
(CRRO) Project, (R.O. Re-ject Wastewater)**

***Potable Water Saved**

Baseline for 2011 - 771,394,490

Baseline for 2012 - 691,394,490

**Estimated 2012 savings = 80,000,000 gallons saved by not being
Purchased from the City of
Indianapolis.**

***Wastewater not discharged to local POTW**

Baseline for 2011 - 178,264,490

Goal Quantity for 2012 - 98,264,490

**Estimated 2012 Savings = 80,000,000 gallons saved or not discharged
to local POTW.**

Grand Total/Bottom Line

**Dollars Saved for both “Potable Water Saved” and “Wastewater not
discharged” = an estimated \$440,000 per year.**