



# INDIANA ENVIRONMENTAL STEWARDSHIP PROGRAM ANNUAL PERFORMANCE REPORT

State Form 53475 (R6 / 2-19)  
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT  
ENVIRONMENTAL STEWARDSHIP PROGRAM

Indiana Department of Environmental Management  
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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 1<sup>st</sup>** of every year, for each calendar year in which the entity has been a member for at least three (3) full months. Membership terms are renewed every four (4) years through submitting your APR. 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](mailto: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](mailto:esp@idem.IN.gov) or (800) 988-7901.

## SECTION A FACILITY INFORMATION

Name of facility	Cummins Fuel Systems Plant / General Office Building
Name of parent company (if applicable)	Cummins Inc.
Street address (number and street)	1460 N National Road
City / State / ZIP code	Columbus, IN 47201
Website of facility / company	cummins.com

## CONTACT INFORMATION

Name of Contact (Mr. / Mrs. / Ms. / Dr.)	Mrs. Anna Watson (formerly Baker)		Title	HSE Supervisor	
Telephone number	(812) 5082839	FAX number	( )	E-mail address	LT532@cummins.com
Mailing address (if different from facility address)					
City / State / ZIP Code					

## REPORTING PERIOD

Reporting period dates from prior calendar year (mm/dd/yyyy – mm/dd/yyyy)

01/01/2019 - 12/31/2019

1a. Is this the fourth 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: \_\_\_\_\_

☒ No

## SECTION B PUBLIC OUTREACH AND PERFORMANCE REPORTING

<b>Why do we need this information?</b> IDEM needs to know how environmental information was shared with the public.	<b>What do you need to do?</b> 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. <b>Energy conservation and efficiency projects.</b>	
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.	
<input type="checkbox"/> Web site ( <a href="http://www.">http://www.</a> ) <input type="checkbox"/> Open house <input checked="" type="checkbox"/> Meetings <input type="checkbox"/> Press releases <input checked="" type="checkbox"/> Other <u>upon request</u>	

**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 EMS Lead Auditor at least every thirty-six (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 EMS Lead Auditor performed an EMS assessment at your facility? December 2019

2. Name, title, and organization of ISO 14001 EMS Lead Auditor who conducted the most recent EMS assessment: \_\_\_\_\_  
Russell Sillery, Lead Auditor, Bureau Veritas Certification North America, Inc

3. Is the date of the most recent EMS assessment performed by an ISO 14001 EMS Lead Auditor within the past thirty-six (36) months?

☒ Yes—If yes, skip to Question 4.

☐ No—If no, please have your ISO 14001 EMS Lead Auditor complete and sign the following checklist, indicating whether or not your EMS meets the listed criteria for ESP membership:

- |                              |                             |   |
|------------------------------|-----------------------------|---|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Evidence of senior management support, commitment, and approval.  |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | A written environmental policy directed toward compliance, pollution prevention, and continuous improvement.  |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Identification of the environmental aspects at the entity.  |
| <input type="checkbox"/> Yes | <input type="checkbox"/> 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.   |
| <input type="checkbox"/> Yes | <input type="checkbox"/> 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. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> 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.  |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Incorporation of environmental and pollution prevention planning in the development of new products, processes, and services and modifications of existing processes.   |
| <input type="checkbox"/> Yes | <input type="checkbox"/> 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.   |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Documentation of the implementation procedures and the results of implementation.   |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Appropriate written EMS procedures.   |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | An annual evaluation of the EMS with written results provided to senior management and affected employees.  |

\_\_\_\_\_  
*Signature of ISO 14001 EMS Lead Auditor*

\_\_\_\_\_  
*Date (month, day, year)*

4. Were any deficiencies found during the most recent EMS assessment?

☐ Yes—If yes, describe any deficiencies found and the corrective action taken to address each deficiency: \_\_\_\_\_

☒ No

5. What type of protocol was used to perform the independent EMS assessment?

☒ ISO 14001:2015 Certified 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 14001:2015

☐ Responsible Care EMS

☐ Responsible Care 14001

☐ No

SECTION C	ENVIRONMENTAL MANAGEMENT SYSTEM ASSESSMENT CONTINUED
7.	When was the last Senior Management review of your EMS completed? Month / Year: <u>January 2020</u> Who headed the review (name and title)? <u>Anna Baker - HSE Supervisor</u>
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: <u>Entire Site HSE Compliance</u> Month(s) / Year(s): <u>October 2019</u> Who conducted the audit(s) (e.g., facility staff, corporate, third party)? <u>Third party</u>
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? The site experienced severe weather threats which resulted in emergency plans to be utilized to get employees to safety until the hazard passed. The plans worked effectively and no changes were made.
10.	Has your facility corrected all instances of potential environmental non-compliance and EMS non-conformance identified during your audits and other assessments?  <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> <b>Yes</b>—If yes, briefly summarize corrective actions taken and other improvements made as a result of your EMS assessment(s) or compliance audit(s).                          Various procedures, plans, work instructions, and trainings were updated or conducted as part of the effort to correct any deviations.                     </div> <div style="width: 45%;"> <input type="checkbox"/> <b>No</b>—If no, please explain your plans to correct these instances.                     </div> <div style="width: 45%;"> <input type="checkbox"/> <b>No such instances identified.</b> </div> </div>

SECTION D	ADDITIONAL INFORMATION
<b>Why do we need this information?</b> This information will help IDEM to effectively manage the Environmental Stewardship Program.	<b>What do you need to do?</b> 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 (12) months. None at this time.
2.	Has your facility taken advantage of any ESP incentives? If so, please describe the implementation process and list additional benefits IDEM should consider. Not at this time.
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		
<b>Why do we need this information?</b> Facilities need to share the results of the environmental improvement initiative that was pursued during the reporting period. IDEM needs to report cumulative program reduction results.	<b>What do you need to do?</b> Reference Section F for "Category" and "Indicator" options to complete this section. Summarize your facility's progress on achieving the initiative you identified in the application or last year's APR. For assistance, please call (800) 988-7901 or email <a href="mailto:esp@idem.IN.gov">esp@idem.IN.gov</a> .		
<b>Initiative #1</b>			
Category 1: <u>Energy</u>	Baseline	Current	Cost Savings
Indicator 1: <u>Electricity kwh</u>	<i>(indicate measurement unit)</i>	<i>(indicate measurement unit)</i>	
Calendar year	2018	2019	
Actual quantity (per year)	41,351,482	38,510,122	\$88,715
Production unit (select one)	Earned Labor Hours      Production units X      Production lbs. Other – specify (e.g. Gallons, length, etc.)		
Production Quantity	238,568	228,981	NA
Normalization factor (Current year production ÷ Baseline year production) <u>1.04</u>			
Normalized quantity (Actual current year quantity ÷ Actual baseline quantity) x Normalization factor <u>2,955,014 kwh</u>			
Briefly describe how you achieved improvements for environmental initiative #1 or, if relevant, any circumstances that delayed progress. The site has a team of cross functional individuals dedicated to the sustainability improvements at the site. Projects that contributed to success: LED lighting conversion in some office areas, compressed air nozzle efficiency, holiday power down, also air handler refurbishment.			



SECTION E		ENVIRONMENTAL IMPROVEMENT INITIATIVE RESULTS CONTINUED	
<b>Initiative #2</b>			
Category 2: <u>Energy</u> Indicator 2: <u>Natural Gas MMBTU</u>	Baseline ( <i>indicate measurement unit</i> )	Current ( <i>indicate measurement unit</i> )	Cost Savings
Calendar year	2018	2019	
Actual quantity ( <i>per year</i> )	54,495	48,569	Due to invoice availability the true cost savings is not available at this time.
Production unit ( <i>select one</i> )	Earned Labor Hours      Production units X      Production lbs. Other – specify (e.g. Gallons, length, etc.)		
Production Quantity	238,568	228,981	NA
Normalization factor (Current year production ÷ Baseline year production) 1.04			
Normalized quantity (Actual current year quantity ÷ Actual baseline quantity) x Normalization factor 6,163 MMBTU			
Briefly describe <i>how</i> you achieved improvements for environmental initiative #2 or, if relevant, any circumstances that delayed progress. The site has a sustainability team consisting of cross functional employees driving improvements in energy, water, and waste. For the savings in natural gas we attribute these savings to efficiency improvements in the roof top air handling units due to refurbishment and continued effort on powering down on weekends and holidays.			
<b>Initiative #3</b>			
Category 3: _____ Indicator 3: _____	Baseline ( <i>indicate measurement unit</i> )	Current ( <i>indicate measurement unit</i> )	Cost Savings
Calendar year			
Actual quantity ( <i>per year</i> )			
Production unit ( <i>select one</i> )	Earned Labor Hours      Production units      Production lbs. Other – specify (e.g. Gallons, length, etc.)		
Production Quantity			NA
Normalization factor (Current year production ÷ Baseline year production)			
Normalized quantity (Actual current year quantity ÷ Actual baseline quantity) x Normalization factor			
Briefly describe <i>how</i> you achieved improvements for environmental initiative #3 or, if relevant, any circumstances that delayed progress.			
1. Briefly describe the <i>impacts or wastes</i> eliminated resulting from the environmental initiative(s). If multiple initiatives, please indicate which specifically. The wastes eliminated for the energy efficiency projects is the reduction in energy consumed and therefore we operate at a more efficient level.			
2. Are there other best management practices (BMPs) you can share correlating to your initiative(s)? Not at this time.			
3. If the objectives and targets associated with the environmental improvement initiative(s) were not attained, please verify continued progress toward the environmental initiative(s). If multiple initiatives, please indicate which specifically. Misses in our targets for 2019 include the water conservation efforts and the recycling rates. The miss associated with water conservation was due to a water leak in our cooling tower. The site planned to be landfill free by the end of the year but there was a miss with a supplier handling our recyclable material by sending it to the landfill.			
4. Please provide a narrative summary of progress made toward <i>qualitative, significant</i> EMS objectives and targets, if any. The site has realigned the sustainability team to meet twice a month when conditions allow (nonpandemic). This team involves manufacturing engineering so the manufacturing processes can be made more sustainable and influence can be made pro actively instead of reactively.			
5. 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 site is a Superior Energy Performer site, certified to Silver Level.			
6. Is your entity willing to share the environmental improvement initiative(s) and its best management practices (BMPs) at the ESP Annual Meeting and/or a Partners for Pollution Prevention quarterly meeting or conference? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

**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 next environmental improvement initiative selected by your facility. For the category and indicator selected, list the **baseline year** (e.g., 2015) and the **future year** (e.g., 2016). 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 20__	Future Year 20__	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			Pounds, tons
<input checked="" type="checkbox"/> Water Use	<input checked="" type="checkbox"/> Total water used	29,810,100	25,288,374	Gallons
<input checked="" type="checkbox"/> Energy Use	<input checked="" type="checkbox"/> Electricity			kWh / MWh, Btu / MMBtu
	<input type="checkbox"/> Steam			kWh / MWh, gallons, ft <sup>3</sup>
	<input checked="" type="checkbox"/> Natural gas			Btu / MMBtu
	<input checked="" type="checkbox"/> Diesel			Gallons
	<input checked="" 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 checked="" type="checkbox"/> Other: <u>Total MMBTU</u>	442,900	415,570	MMBTU
<input type="checkbox"/> Land and Habitat	<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			MTCO <sub>2</sub> E
	<input type="checkbox"/> VOCs			Pounds, tons
	<input type="checkbox"/> NO <sub>x</sub> , SO <sub>x</sub> , PM <sub>2.5</sub> , PM <sub>10</sub> , 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"/> Discharges to Water	<input type="checkbox"/> COD or BOD			Pounds, tons
	<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 checked="" type="checkbox"/> Non-hazardous Waste	<input checked="" type="checkbox"/> Landfill	160,328	3,745	Pounds, tons
<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

If you need assistance filling out the form, please contact the ESP program manager at either [esp@dem.in.gov](mailto:esp@dem.in.gov) or 1-(800) 988-7901.

## SECTION F

FUTURE YEAR ENVIRONMENTAL IMPROVEMENT INITIATIVE  
CONTINUED

2. If the environmental improvement initiative(s) will be *qualitative* in nature, please describe. \_\_\_\_\_  
There may be some improvement initiatives that are qualitative in nature such as a feedback or improvement suggestion initiative, additional visual signage, new recycling stations, etc.
3. 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 plan to try to utilize control technology to automate some resource use. We also plan to improve in the visualization of the proper shutdown process for better holiday and weekend shutdowns.
4. 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) Cummins Fuel Systems Plant / General Office Building

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, Cummins Fuel Systems Plant / General Office Building, 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 we must meet the requirement of implementing one (1) new, independent environmental improvement initiative each year of membership (for a total of four (4) initiatives), that the Annual Performance Report must be submitted to IDEM by April 1<sup>st</sup> of each year, and that we must reapply to the Indiana Environmental Stewardship Program every four (4) 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		Date (month, day, year)	5/30/2020
Printed signature	El Hadji Fame	Title	Fuel Systems Columbus Plant Manager