



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
Office of Program Support
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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 1st 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. 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

Toyota Material Handling Inc.

Name of parent company (if applicable)

Street address (number and street)

5559 Inwood Drive

City / State / ZIP code

Columbus IN 47201

Website of facility / company

CONTACT INFORMATION

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

Allen Ruddick

Title

Telephone number

(812) 342-8606

FAX number

()

E-mail address

Allen.Ruddick@ToyotaTMH.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)

1/1/2019 to 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

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.

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.toyotaforklift.com>) ☒ Open house ☒ Meetings ☒ Press releases ☒ Other Local community

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? 10-22-2019

2. Name, title, and organization of ISO 14001 EMS Lead Auditor who conducted the most recent EMS assessment: Kurt Koesters, DNV-GL Lead Auditor

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: 10/2019
Who headed the review (name and title)? Dixon Churchill EHS 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: Comprehensive Environmental
Month(s) / Year(s): 10/2017
Who conducted the audit(s) (e.g., facility staff, corporate, third party)? Cornerstone Environmental
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?

There were no emergencies during 2019. The Hazardous Waste Contingency Plan was updated in August 2019. The Storm Water Pollution Prevention Plan and the Spill Prevention Control and Countermeasure plans were updated in December 2019.
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.

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 (12) months.
Belong to Partners For Pollution Prevention; Indiana Industrial Operators Association. (TMH/TIEM) donated \$3000 and 500 trees to Bartholomew Solid Waste Management in support of Arbor Day.
2. Has your facility taken advantage of any ESP incentives? If so, please describe the implementation process and list additional benefits IDEM should consider.
Yes, Advance notice of inspection and benchmarking with other ESP members..
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?
(TMH/TIEM) was ISO14001 certified before joining ESP.

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. IDEM needs to report cumulative program reduction results.

What do you need to do?

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 esp@idem.IN.gov.

Initiative #1

Category 1: <u>Electricity</u> Indicator 1: <u>KWh/Unit</u>	Baseline <i>(indicate measurement unit)</i>	Current <i>(indicate measurement unit)</i>	Cost Savings
Calendar year	2015 2018	2019	
Actual quantity <i>(per year)</i>	26,316,000 33,130,000	31,076,000	51.3 kWh per unit reduction.
Production unit <i>(select one)</i>	Earned Labor Hours Other – specify (e.g. Gallons, length, etc.)	Production units	Production lbs.
Production Quantity	34,386 46,922	43,526	NA
Normalization factor (Current year production ÷ Baseline year production)			1.27 0.9276
Normalized quantity (Actual current year quantity - Actual baseline quantity) x Normalization factor			11,607.8 2,599,965.2
Briefly describe <i>how</i> you achieved improvements for environmental initiative #1 or, if relevant, any circumstances that delayed progress.			
A slight reduction in production resulted in a slight 51.3 kWh) per unit decrease.			
43.78 per unit decrease			

SECTION E

ENVIRONMENTAL IMPROVEMENT INITIATIVE RESULTS
CONTINUED

Initiative #2

Category 2: <u>Natural Gas</u> Indicator 2: <u>DecaTherm/Unit</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>)	142,804	156,497	
Production unit (<i>select one</i>)	Earned Labor Hours Other – specify (e.g. Gallons, length, etc.)	Production units Production lbs.	
Production Quantity	46,922	43,526	NA
Normalization factor (Current year production ÷ Baseline year production) 1.1			
Normalized quantity (Actual current year quantity ÷ Actual baseline quantity) × Normalization factor -3,396.6			
Briefly describe <i>how</i> you achieved improvements for environmental initiative #2 or, if relevant, any circumstances that delayed progress. Production reduction resulted in a slight increase in decatherms per unit. Also 67% of the natural gas used at TIEM is for HVAC.			

Initiative #3

Category 3: <u>Haz waste</u> Indicator 3: <u>Gal./Unit</u>	Baseline (<i>indicate measurement unit</i>)	Current (<i>indicate measurement unit</i>)	Cost Savings
Calendar year	2015 2018	2019	
Actual quantity (<i>per year</i>)	6215	7775	
Production unit (<i>select one</i>)	Earned Labor Hours Other – specify (e.g. Gallons, length, etc.)	Production units Production lbs.	
Production Quantity	34,386 46,922	43,526	NA
Normalization factor (Current year production ÷ Baseline year production) 1.27 0.928			
Normalized quantity (Actual current year quantity ÷ Actual baseline quantity) × Normalization factor 1981 1,447			
Briefly describe <i>how</i> you achieved improvements for environmental initiative #3 or, if relevant, any circumstances that delayed progress. Use of solvent still, plus reducing flush amount used for paint lines.			
1. Briefly describe the <i>impacts or wastes</i> eliminated resulting from the environmental initiative(s). If multiple initiatives, please indicate which specifically. (TMH/TIEM) has been able to hold electric and natural gas usage relatively flat in spite of expanding multiple times. The solvent still has allowed (TMH/TIEM) to reduce the hazardous waste per unit down.			
2. Are there other best management practices (BMPs) you can share correlating to your initiative(s)?			
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. (TMH/TIEM) did not meet its targets for natural gas reductions. However, during 2019 (TMH/TIEM) began to push for Associates to turn off fans, task lighting and office lights when not in use. Engineering and Manufacturing started a plan to shut down every feasible piece of equipment when not producing product.			
4. Please provide a narrative summary of progress made toward <i>qualitative, significant</i> EMS objectives and targets, if any. 1. Shutting more equipment down after production. 2. Keeping overhead doors closed when the outside temperature is below 60 degrees and reducing the temperature set point during heating months. 3. Purchasing wind energy to off set electric CO2 production and improved air leak reduction efforts.			
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).			
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"/> Materials used			Pounds, tons
	<input type="checkbox"/> Hazardous materials used			Pounds, tons
<input type="checkbox"/> Material Use	<input type="checkbox"/> Ozone depleting substances used			CFC-11 equivalent pounds
	<input type="checkbox"/> Total packaging materials used			Pounds, tons
<input type="checkbox"/> Water Use	<input type="checkbox"/> Total water used			Gallons
	<input checked="" type="checkbox"/> Electricity	33,130,000 kWh	24,847,500 kWh	kWh / MWh, Btu / MMBtu
	<input type="checkbox"/> Steam			kWh / MWh, gallons, ft ³
	<input checked="" type="checkbox"/> Natural gas	142,803 BTU	128,522 BTU	Btu / MMBtu
	<input type="checkbox"/> Diesel			Gallons
	<input type="checkbox"/> Propane / LPG			Btu / MMBtu, gallons
	<input type="checkbox"/> Gasoline			Gallons
<input checked="" type="checkbox"/> Energy Use	<input type="checkbox"/> Solar			kWh / MWh
	<input checked="" type="checkbox"/> Wind	0 kWh	8,282,500 kWh	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	<input type="checkbox"/> Land and habitat conservation			Square feet, acres
	<input type="checkbox"/> Community land revitalization			Square feet, acres
	<input type="checkbox"/> Total GHGs			MTCO ₂ E
	<input checked="" type="checkbox"/> VOCs	42.3 tons	45.55 tons	Pounds, tons
<input type="checkbox"/> Air Emissions	<input type="checkbox"/> NO _x , SO _x , 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"/> Toxics			Pounds, tons
<input type="checkbox"/> Discharges to Water	<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	0	0	Pounds, tons
<input checked="" type="checkbox"/> Hazardous Waste	<input checked="" type="checkbox"/> Incineration	407 tons	409.53 tons	Pounds, tons
	<input checked="" type="checkbox"/> Reused/recycled off-site	6875 gallons	6875 gallons	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"/> Expected lifetime energy use			kWh / MWh, Btu / MMBtu
	<input type="checkbox"/> Expected lifetime water use			Gallons
<input type="checkbox"/> Products	<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@idem.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. _____
Addressing Associate habits that waste energy and improve recycling.
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)? _____
TMH will be purchasing 28% of the electricity as wind energy for CY 2020. Also TMH has invested in state of the art air leak detector and is using it on a daily basis. TMH is also working through an updated daily equipment shutdown list along with reducing natural gas waste opportunities.
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

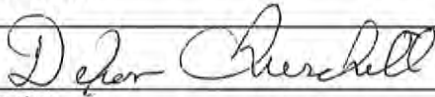
On behalf of (name of facility) Toyota Material Handling Inc.

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, Toyota Material Handling 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 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 1st 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)

4-22-20

Printed signature

Dixon Churchill

Title

EHS Manager